

# **Consult Toolbox (CTB) v2.0**

## **User Guide**



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**Department of Veterans Affairs**

**Office of Information and Technology (OIT)**

## Revision History

NOTE: The revision history cycle begins once changes or enhancements are requested after the document has been baselined.

Date	Revision	Description	Author
11/29/2021	1.2	Items from section 4: Using the Software were removed and placed in the Help Files within Consult Toolbox.	VetsEZ
08/06/2021	1.1	Updates made to document to reflect changes in CTB v2.0.	VetsEZ
07/20/2021	1.0	Initial Release CTB v2.0	VetsEZ

## Artifact Rationale

Per the Veteran-focused Integrated Process (VIP) Guide, the User's Guide is required to be completed prior to Critical Decision Point #2 (CD2), with the expectation that it will be updated as needed. A User Guide is a technical communication document intended to give assistance to people using a particular system, such as VistA end users. It is usually written by a technical writer, although it can also be written by programmers, product or project managers, or other technical staff. Most user guides contain both a written guide and the associated images. In the case of computer applications, it is usual to include screenshots of the human-machine interfaces, and hardware manuals often include clear, simplified diagrams. The language used is matched to the intended audience, with jargon kept to a minimum or explained thoroughly. The User Guide is a mandatory, build-level document, and should be updated to reflect the contents of the most recently deployed build. The sections documented herein are required if applicable to your product.

# Table of Contents

<b>1. Introduction.....</b>	<b>1</b>
1.1. Purpose .....	1
1.2. Document Orientation .....	1
1.2.1. Organization of the Manual .....	1
1.2.2. Assumptions.....	2
1.2.3. Coordination .....	2
1.2.4. Disclaimers .....	2
1.2.4.1. Software Disclaimer.....	2
1.2.4.2. Documentation Disclaimer.....	2
1.2.5. Documentation Conventions.....	2
1.2.6. References and Resources.....	3
1.3. Enterprise Service Desk and Organizational Contacts .....	3
<b>2. System Summary .....</b>	<b>3</b>
2.1. System Configuration .....	3
2.2. Data Flows.....	4
2.3. User Access Levels.....	4
2.4. Continuity of Operation.....	4
<b>3. Getting Started.....</b>	<b>4</b>
3.1. Accessing Consult Toolbox.....	4
3.2. System Menu .....	5
3.2.1. Consult Toolbox v2.0 Dashboard Header .....	5
3.2.1.1. What's New.....	6
3.2.1.2. Help.....	7
3.2.1.3. Exit Consult Toolbox.....	7
3.2.2. Consult Toolbox Workflow Menu.....	7
<b>4. Using the Software.....</b>	<b>9</b>
4.1. User Settings.....	9
4.2. Order a Consult.....	9
4.2.1. Order a Consult: CC Eligibility (DST) Workflow .....	9
4.2.2. Order a Consult: CC Patient Preferences Workflow.....	9
4.3. Order an Admin Consult.....	9
4.3.1. Order an Admin Consult: VCCPE-Admin CC Eligibility (DST) Workflow.....	9
4.3.2. Order an Admin Consult: VCCPE-Admin Patient Preferences Workflow.....	9
4.4. Receiving Consults .....	10
4.4.1. Receiving VA Consult Activities.....	10
4.4.1.1. Receiving VA Consult Review Workflow.....	10
4.4.1.2. Receiving VA CC Eligibility (DST) Workflow.....	10
4.4.1.3. Receiving VA Contact Attempts.....	10

4.4.1.4.	Receiving VA Patient Preferences Workflow.....	10
4.4.2.	Receiving Community Care Consult Activities.....	10
4.4.2.1.	Receiving Community Care Consult Review .....	10
4.4.2.2.	Receiving Community Care CC Eligibility (DST) .....	10
4.4.2.3.	Receiving Community Care Contact Attempts.....	10
4.4.2.4.	Receiving Community Care Patient Preferences .....	10
4.4.2.5.	Receiving Community Care Admin Screening.....	11
4.4.2.5.1.	Receiving Community Care Admin Screening Workflow .....	12
4.4.2.6.	Receiving Community Care Clinical Triage.....	14
4.4.2.6.1.	Receiving Community Care Clinical Triage Workflow .....	16
4.4.2.7.	Receiving Community Care Community Care DoD Consult .....	18
4.5.	Forward Consult .....	18
4.5.1.	Forward Consult to CC Activities.....	18
4.5.1.1.	Forward Consult to Community Care .....	18
4.5.1.1.1.	Forward Consult Workflow .....	19
4.5.1.2.	Forward Community Care CC Eligibility (DST) Workflow .....	20
4.5.1.3.	Forward Community Care Patient Preferences Workflow .....	20
4.6.	Add Comment to Consult.....	21
4.6.1.	VA Consult Comment.....	21
4.6.1.1.	VA Consult Comment Consult Review Workflow.....	21
4.6.1.2.	VA Consult Comment CC Eligibility (DST) Workflow.....	21
4.6.1.3.	VA Consult Comment Contact Attempts Workflow .....	21
4.6.1.4.	VA Consult Comment Patient Preferences Workflow.....	21
4.6.2.	Community Care Consult Comment.....	21
4.6.2.1.	Community Care Consult Comment Consult Review .....	21
4.6.2.1.1.	Community Care Consult Comment Consult Review Workflow .....	24
4.6.2.2.	Community Care Consult Comment CC Eligibility (DST) Workflow.....	26
4.6.2.3.	Community Care Consult Comment Contact Attempts Workflow.....	26
4.6.2.4.	Community Care Consult Comment Patient Preferences Workflow.....	26
4.6.2.5.	Community Care Consult Comment Admin Screening.....	26
4.6.2.5.1.	Community Care Consult Comment Admin Screening Workflow .....	28
4.6.2.6.	Community Care Consult Comment Clinical Triage.....	30
4.6.2.6.1.	Community Care Consult Comment Clinical Triage Workflow .....	32
4.6.2.7.	Community Care Consult Comment DoD Consult Workflow .....	34
4.6.2.8.	Community Care Consult Comment Appointment Tracking .....	34
4.6.2.8.1.	Community Care Consult Comment Appointment Tracking Workflow .....	37
4.6.2.9.	Community Care Consult Comment Request for Service (RFS).....	39
4.6.2.9.1.	Community Care Consult Comment Request for Service (RFS) Workflow .....	40
4.6.2.10.	Community Care Consult Comment Consult Completion.....	43
4.6.2.10.1.	Community Care Consult Comment Consult Completion Workflow .....	44
4.7.	Update Significant Findings .....	46
4.7.1.	Significant Findings .....	46
4.7.1.1.	Significant Findings Workflow.....	47

4.7.2. Request for Service (RFS) .....	49
4.7.2.1. Request for Service (RFS) Workflow .....	51
4.8. Discontinue Consult .....	53
4.9. Cancel (Deny) Consult .....	54
4.9.1. VA Cancel Consult .....	54
4.9.1.1. VA Cancel Consult Workflow .....	55
4.9.2. Community Care Cancel Consult .....	57
4.9.2.1. Community Care Cancel Consult Workflow .....	58
4.10. Administrative Complete.....	60
4.10.1. Administrative Complete Consult Workflow .....	60
4.11. View Consult History .....	62
<b>Appendix A: Acronyms and Abbreviations.....</b>	<b>64</b>
<b>Appendix B: Consult Factor Types and Definitions .....</b>	<b>65</b>

## Table of Figures

Figure 1: Consult Toolbox Data Flow .....	4
Figure 2: Consult Toolbox Dashboard Screen.....	5
Figure 3: Consult Toolbox Dashboard Header .....	5
Figure 4: What's New Modal Dialog.....	7
Figure 5: Consult Toolbox Dashboard Workflow Menu Example.....	8
Figure 18: Receiving Community Care Admin Screening Dashboard Screen (1 of 2) .....	11
Figure 19: Receiving Community Care Admin Screening Dashboard Screen (2 of 2) .....	11
Figure 20: Receive Consult Dialog Box .....	13
Figure 21: Receiving Community Care Admin Screening Dashboard Screen .....	13
Figure 22: Receiving Community Care Admin Screening Options.....	14
Figure 23: Receiving Community Care Clinical Triage Dashboard Screen (1 of 2) .....	15
Figure 24: Receiving Community Care Clinical Triage Dashboard Screen (2 of 2) .....	15
Figure 25: Receive Consult Dialog Box .....	16
Figure 26: Receiving Community Care Clinical Triage Dashboard Screen .....	17
Figure 27: Receiving Community Care Clinical Triage Dashboard Screen Options .....	17
Figure 28: Forward Consult to Community Care Dashboard Screen .....	18
Figure 29: Forward Consult Dialog Box.....	19
Figure 30: Forward Consult to Community Care Dashboard Screen .....	20
Figure 31: CC Consult Comment Consult Review Dashboard Screen.....	21
Figure 32: Community Care Program Menu Options.....	22
Figure 33: Add Comment to Consult Dialog Box .....	24

Authorized Use Only

Figure 34: CC Consult Comment Consult Review Dashboard Screen.....	25
Figure 35: CC Consult Comment Admin Screening Dashboard Screen .....	26
Figure 36: Add Comment to Consult Dialog Box .....	28
Figure 37: CC Consult Comment Admin Screening Dashboard Screen .....	29
Figure 38: CC Consult Comment Admin Screening Dashboard Screen Options.....	29
Figure 39: CC Consult Comment Clinical Triage Dashboard Screen .....	31
Figure 40: Add Comment to Consult Dialog Box .....	32
Figure 41: CC Consult Comment Clinical Triage .....	33
Figure 42: CC Consult Comment Clinical Triage Dashboard Screen Options.....	33
Figure 43: CC Consult Comment Appointment Tracking Dashboard Screen.....	34
Figure 44: Reason Referral could not be processed Menu Options.....	36
Figure 45: Add Comment to Consult Dialog Box .....	37
Figure 46: CC Consult Comment Appointment Tracking Dashboard Screen.....	38
Figure 47: CC Consult Comment Request for Service (RFS) Dashboard Screen .....	39
Figure 48: Add Comment to Consult Dialog Box .....	41
Figure 49: CC Consult Comment Request for Service (RFS) Dashboard Screen .....	42
Figure 50: CC Consult Comment Consult Completion Dashboard Screen .....	43
Figure 51: Add Comment to Consult Dialog Box .....	44
Figure 52: CC Consult Comment Consult Completion Dashboard Screen .....	45
Figure 53: Significant Findings Dashboard Screen .....	46
Figure 54: Update Significant Findings Dialog Box.....	47
Figure 55: Significant Findings Dashboard Screen .....	48
Figure 56: Request for Service (RFS) Dashboard Screen.....	49
Figure 57: Update Significant Findings Dialog Box.....	51
Figure 58: Request for Service (RFS) Dashboard Screen.....	52
Figure 59: Discontinue Consult Dashboard Screen .....	53
Figure 60: Cancel VA Consult Dashboard Screen.....	54
Figure 61: Cancel (Deny) Consult Dialog Box.....	55
Figure 62: Cancel VA Consult Dashboard Screen.....	56
Figure 63: Cancel CC Consult Dashboard Screen .....	57
Figure 64: Cancel (Deny) Consult Dialog Box.....	58
Figure 65: Cancel CC Consult Dashboard Screen .....	59
Figure 66: Administratively Complete Dashboard Screen .....	60
Figure 67: Administratively Complete Dialog Box .....	61
Figure 68: Administratively Complete Dashboard Screen .....	62

Authorized Use Only

Figure 69: Consult History Modal Dialog ..... 63

# 1. Introduction

Consult Toolbox (CTB) software began at the Atlanta VA Medical Center (VAMC) from a need to manage the process of consult management. During the life of a consult, there are actionable steps that must be tracked at an individual patient level. Additionally, the overall status of consult management must be understood at a macro level to identify specific services needing attention or resources. It is difficult to identify which steps Veterans have completed without opening a patient's record.

This software makes it easy for staff to: document completed actions quickly and consistently; it uses consistent language to document these steps; it eliminates the need to take a second action or make a separate entry to track scheduling steps and the consistent language allows software analysis of records without needing software changes to Veterans Health Information Systems and Technology Architecture (VistA) or Computerized Patient Record System (CPRS).

A separate process using Corporate Data Warehouse (CDW) queries and reports allows creation of views displaying instances where Veterans who have not had first call, second call, scheduling letter sent or how much time has passed between these events.

Together, these allow tracking and managing consults without the need of a separate list or other workflow to know which consults need attention.

## 1.1. Purpose

The purpose of this document is to standardize and streamline consult management for Community Care by providing instruction on the use of Consult Toolbox v2.0 (CTB v2.0).

## 1.2. Document Orientation

The *Consult Toolbox v2.0 User Guide* will explain each screen and all user interface options in an easy to understand demonstration data scenario.

This document also provides the user with screen-by-screen "how to" on the usage of CTB 2.0.

### 1.2.1. Organization of the Manual

#### Section 1: Introduction

The Introduction section provides the purpose of this manual, an overview of CTB 2.0 software, project references, contact information for additional information and a manual of acronyms and abbreviations.

#### Section 2: System Summary

The System Summary section provides a graphical representation of the equipment, communication and networks used by the system, user access levels, how the software will be accessed, and contingencies and alternative modes of operation.

#### Section 3: Getting Started

Information for the Getting Started section provides a general walk-through of the system from initiation through exit, enabling users to understand the system's sequence and flow.



## Section 4: Using the Software

This section gives the user “CTB v2.0 how to” information including step-by-step procedures.

## Section 5: Troubleshooting

This section provides troubleshooting for the CTB v2.0 user.

## Section 6: Acronyms and Abbreviations

This section provides a list of acronyms and abbreviations found in this document.

### 1.2.2. Assumptions

The user must have login credentials for CPRS.

### 1.2.3. Coordination

N/A

### 1.2.4. Disclaimers

#### 1.2.4.1. Software Disclaimer

This software was developed at the Department of Veterans Affairs (VA) by employees of the Federal Government in the course of their official duties. Pursuant to title 17 Section 105 of the United States Code this software is not subject to copyright protection and is in the public domain. VA assumes no responsibility whatsoever for its use by other parties, and makes no guarantees, expressed or implied, about its quality, reliability, or any other characteristic. We would appreciate acknowledgement if the software is used. This software can be redistributed and/or modified freely provided that any derivative works bear some notice that they are derived from it, and any modified versions bear some notice that they have been modified.


#### 1.2.4.2. Documentation Disclaimer

The appearance of external hyperlink references in this manual does not constitute endorsement by the Department of Veterans Affairs (VA) of this Web site or the information, products, or services contained therein. The VA does not exercise any editorial control over the information you may find at these locations. Such links are provided and are consistent with the stated purpose of the VA.

### 1.2.5. Documentation Conventions

This manual uses several methods to highlight different aspects of the material.

**Table 1. Documentation Symbols and Descriptions**

Symbol	Description
	<b>CAUTION:</b> Used to caution the reader to take special notice of critical information.

**NOTE:** Notes are used to inform the reader of general information including references to additional reading material.

### 1.2.6. References and Resources

Readers who wish to learn more about CPRS and CTB v2.0 should consult the following:

- Consult Toolbox Help Files that are found within CTB v2.0.
- CPRS: Consult/Request Tracking in the VDL:  
<https://www.va.gov/vdl/application.asp?appid=62>
- [Office of Community Care \(OCC\) Field Guidebook](#)
- [Consult Management - Home \(sharepoint.com\)](#)

## 1.3. Enterprise Service Desk and Organizational Contacts

For issues related to the CTB v2.0 that cannot be resolved by this manual or the site administrator, please contact the Enterprise Service Desk at 855-NSD-HELP (673-4357).

# 2. System Summary

## 2.1. System Configuration

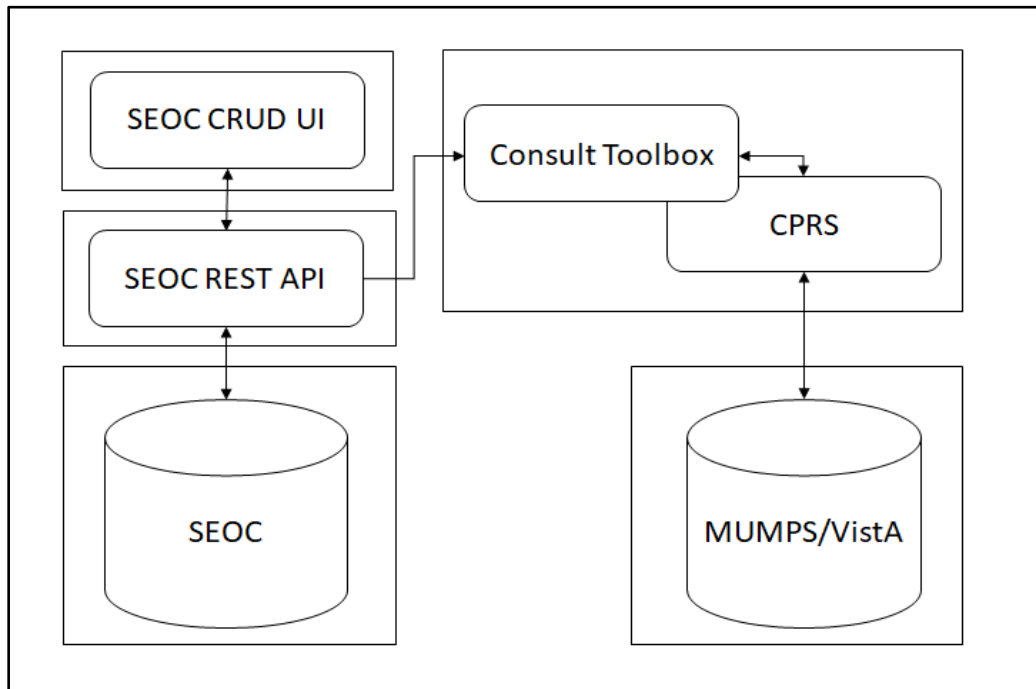
CTB v2.0 is accessed by clicking on the **Open Consult Toolbox** button found on each of the following CPRS screens:

- Order a Consult
- Receive a Consult
- Discontinue Consult
- Cancel (Deny) Consult
- Forward Consult
- Add Comment to Consult
- Update Significant Findings
- Administratively Complete

## 2.2. Data Flows

The figure below displays CTB v2.0 data flow between CPRS and SEOC.

**Figure 1: Consult Toolbox Data Flow**



## 2.3. User Access Levels

The user must have access to CPRS to access CTB v2.0.

## 2.4. Continuity of Operation

CTB v2.0 falls under the VistA Continuity of Operations Plan.

# 3. Getting Started

This section provides a general guide through CTB v2.0 from initiation to exit.

## 3.1. Accessing Consult Toolbox

CTB v2.0 is part of the CPRS system requiring a user name and password. CTB is accessed from various workflows within the CPRS application.

**NOTE:** *If you are unable to access/use CTB v2.0, see the Troubleshooting section in this document or contact the National Service Desk at 855-NSD-HELP (673-4357).*

## 3.2. System Menu

The **Action>Consult Tracking...** menu in CPRS offers several CTB v2.0 functions: **Receive, Cancel (Deny), Discontinue, Forward, Add Comment, Significant Findings,** and **Administrative Complete**. Once you select a workflow, you are brought to the Consult Toolbox Dashboard screen. Another workflow option is Order a Consult and this workflow is accessed through New Consult.

Figure 2: Consult Toolbox Dashboard Screen

Consult Toolbox

**Consult Toolbox**

What's New Help

**Veteran Name**  
DSTSEVEN, CHYSHRSEVEN

**Date of Birth**  
Mar 29, 1955 (66)

**Residential Address**  
287 West St  
Rocky Hill, CT 06067  
(41.65342, -72.65031)

**Consult to Service/Specialty**  
Audiology

**Urgency**  
ROUTINE

**CID**  
07/30/2021

**Seen As**  
Outpatient

**Community Care Eligibility**  
BMI Difficulty in traveling

**ORDER CONSULT**

**CC Eligibility (DST)**

Patient Preferences

User Settings

**Clinical Service** (required)  
Polytrauma/Traumatic Brain Injury (TBI)- Individ x Search by SEOC  
Specialty Care - Wait Time Std: 28 days - Drive Time Std: 60 min

**Establish CC Eligibility based on**  
Best Medical Interest of Veteran (BMI)

**BMI Criteria** (required)  
Difficulty in traveling

To be considered if a Veteran has significant difficulties traveling to a VA facility even if the estimated average drive time is less than the drive time standard (30 mins for PC and MH and 60 mins for SC) and doing so would result in clinical compromise to the Veteran's health. Providers should consider the accessibility of the requested service in the community and exhausted VA provided transportation options (SW consult, etc) when making this determination.

**Explanation** (required) 0 / 200

**Veteran's Participation Preference** (required)  
☐ Opt-IN for Community Care  
☐ Opt-OUT of Community Care  
☐ TBD/Deferred

**Additional Comments**

**SAVE CHANGES**

Close Consult Toolbox

### 3.2.1. Consult Toolbox v2.0 Dashboard Header

The CTB v2.0 Dashboard Header is available at the top of every screen in CTB v2.0. It is pictured below.

Figure 3: Consult Toolbox Dashboard Header

Consult Toolbox

**Consult Toolbox**

What's New Help

**Veteran Name**  
DSTSEVEN, CHYSHRSEVEN

**Date of Birth**  
Mar 29, 1955 (66)

**Residential Address**  
287 West St  
Rocky Hill, CT 06067  
(41.65342, -72.65031)

**Consult to Service/Specialty**  
Audiology

**Urgency**  
ROUTINE

**CID**  
07/30/2021

**Seen As**  
Outpatient

**Community Care Eligibility**  
BMI Difficulty in traveling

Within the CTB v2.0 Dashboard Header, you find the following fields:

- **Veteran Name** - Veterans name: a read-only field supplied by CPRS.
- **Date of Birth** - Veterans date of birth; a read-only field supplied by CPRS.
- **Residential Address** - Veterans residential address; a read-only field supplied by the Eligibility & Enrollment System Redesign (E&ESR).
- **Consult to Service/Specialty** – Consult name; a read-only field supplied by CPRS.
- **Urgency** – A read-only field supplied by CPRS.

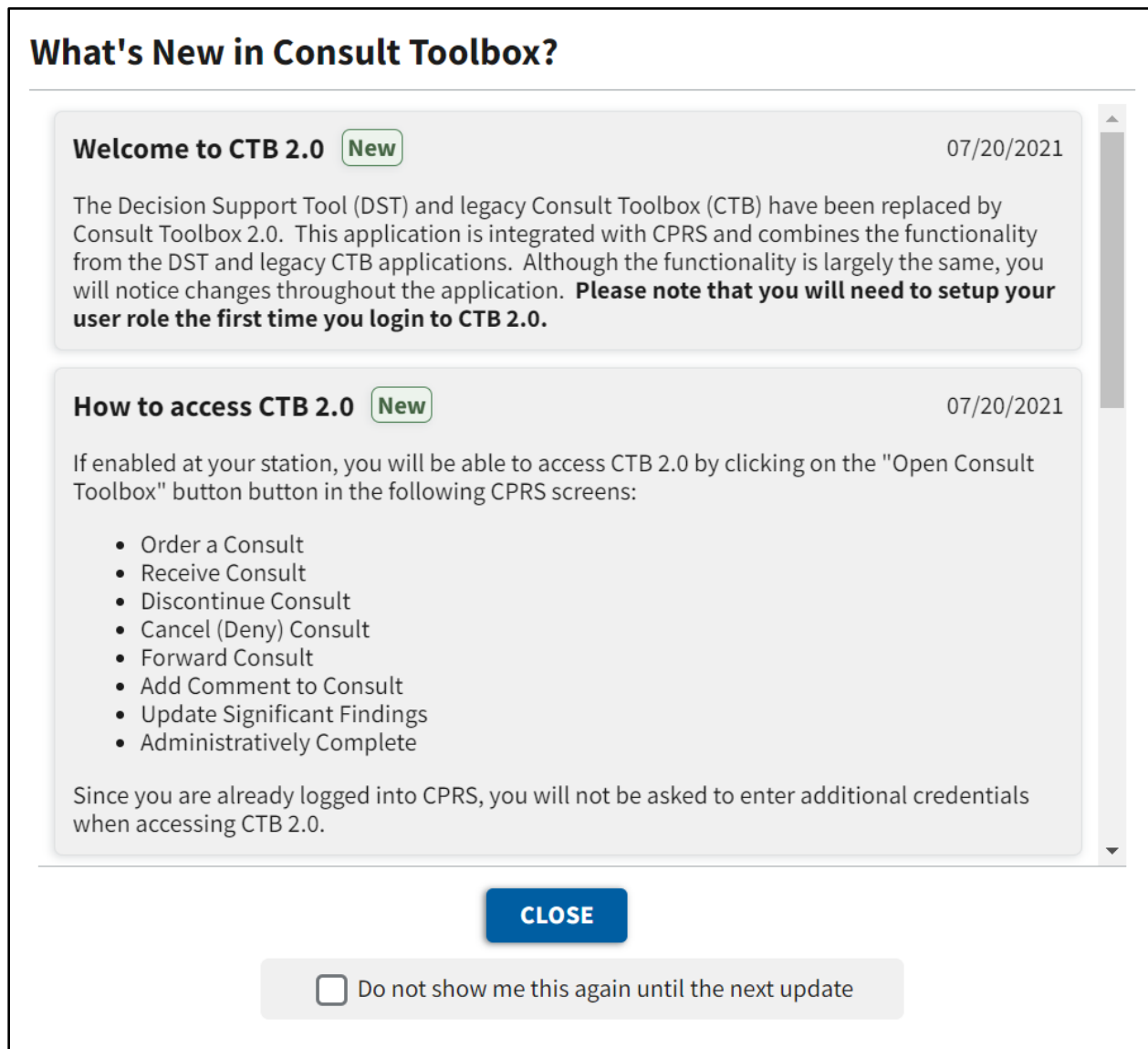
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- **Routine** – Routine consult indicates the patient should be seen in accordance with the clinically indicated date.
- **Stat** – Stat consults are defined as “immediate” need. Senders of stat consults are required to:
  - Contact the intended receiver of the consult request to discuss the patients’ situation.
    - Complete a stat consult within 24 hours.
- **CID** – Clinically indicated date; a read-only field auto-populated from CPRS.
- **Seen As** – Inpatient or outpatient status.
- **Community Care Eligibility** – Displays the community care eligibility of the Veteran and the selected consult including indications if the Veteran is not eligible for CC, if CC has not been established, or if CC has been established based on enrollment factors, drive time, or manually established.

### 3.2.1.1. What’s New

This window lists new features for each release/build. Click the **What’s New** link to open the **CTB: What’s New** modal dialog. The **What’s New** modal dialog is also displayed when CTB 2.0 is launched from CPRS.

Figure 4: What's New Modal Dialog



### 3.2.1.2. Help

Click the **Help** link to open the Consult Toolbox v2.0 User Guide.

### 3.2.1.3. Exit Consult Toolbox

To exit CTB v2.0, click **Close Consult Toolbox** button.

## 3.2.2. Consult Toolbox Workflow Menu

The CTB 2.0 workflow menu corresponds to a specific place in CPRS from which CTB 2.0 is called, such as Receive a Consult, Add Comment to Consult, Order a Consult, etc. The menu lists all of the pages that are available for the selected workflow.

**Figure 5: Consult Toolbox Dashboard Workflow Menu Example**

RECEIVE CC CONSULT
Consult Review
CC Eligibility (DST)
Contact Attempts
Patient Preferences
Admin Screening
Clinical Triage
DoD Consult
View Consult History
User Settings

## 4. Using the Software

The CTB v2.0 provides user functionality in the following consult windows:

- Order a Consult
- Order an Admin Consult
- Receive a Consult
- Cancel (Deny) Consult
- Discontinue Consult
- Forward Consult
- Add Comment to Consult
- Significant Findings
- Administratively Complete

**NOTE:** For a list of Health Factors that are used in CTB v2.0, please refer to Appendix B: Consult Factor Types and Definitions.

### 4.1. User Settings

For additional information please refer to the CTB Help Files.

### 4.2. Order a Consult

#### 4.2.1. Order a Consult: CC Eligibility (DST) Workflow

For additional information please refer to the CTB Help Files.

#### 4.2.2. Order a Consult: CC Patient Preferences Workflow

For additional information please refer to the CTB Help Files.

### 4.3. Order an Admin Consult

#### 4.3.1. Order an Admin Consult: VCCPE-Admin CC Eligibility (DST) Workflow

For additional information please refer to the CTB Help Files.

#### 4.3.2. Order an Admin Consult: VCCPE-Admin Patient Preferences Workflow

For additional information please refer to the CTB Help Files.



## **4.4. Receiving Consults**

Clinicians/delegated administrative staff receive View Alert in CPRS/ of VA order/consult notification. When a provider receives a pending consult, review should include determination of whether the consult is appropriate to be scheduled, and optionally, additional direction can be given to the scheduler.

The Receiving Consult Activities is used by any clinic in the VA facility that receives a consult. This may be an internal VA clinic or the Community Care Office. Additional documentation for contact attempts, capturing patient preferences, if applicable while receiving a consult may be entered here.

### **4.4.1. Receiving VA Consult Activities**

#### **4.4.1.1. Receiving VA Consult Review Workflow**

For additional information please refer to the CTB Help Files.

#### **4.4.1.2. Receiving VA CC Eligibility (DST) Workflow**

For additional information please refer to the CTB Help Files.

#### **4.4.1.3. Receiving VA Contact Attempts**

For additional information please refer to the CTB Help Files.

#### **4.4.1.4. Receiving VA Patient Preferences Workflow**

For additional information please refer to the CTB Help Files.

### **4.4.2. Receiving Community Care Consult Activities**

#### **4.4.2.1. Receiving Community Care Consult Review**

For additional information please refer to the CTB Help Files.

#### **4.4.2.2. Receiving Community Care CC Eligibility (DST)**

For additional information please refer to the CTB Help Files.

#### **4.4.2.3. Receiving Community Care Contact Attempts**

For additional information please refer to the CTB Help Files.

#### **4.4.2.4. Receiving Community Care Patient Preferences**

For additional information please refer to the CTB Help Files.

#### 4.4.2.5. Receiving Community Care Admin Screening

Figure 6: Receiving Community Care Admin Screening Dashboard Screen (1 of 2)

**Consult Toolbox** What's New Help

**Veteran Name**  
PATIENT, TEST  
**Date of Birth**  
Jan 1, 1900 (121)

**Residential Address**  
611 1ST ST W  
Morton, MN 56270  
(38.8943, -77.438683)

**Consult to Service/Specialty**  
Community Care-Audiology  
**Urgency**  
Routine  
**CID**  
08/02/2021  
**Seen As**  
Outpatient

**Community Care Eligibility**  
BMI Need for an attendant

**RECEIVE CC CONSULT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening**
- Clinical Triage
- DoD Consult
- View Consult History
- User Settings

**Admin Screening**

**Prior Admin Screening: Complex/Chronic**  
Complex: New cancer diagnosis  
CAN Score: 75 to 90

☒ Update prior Admin Screening information

☐ Urgent - appointment needed within 48 hours

Does the consult specify any of the following complex/chronic conditions or services? (required)

-- Select --

Does the consult specify any of the following basic services? (required)

-- Select --

**Admin Care Coordination Level**  
Undetermined

**Clinical Triage**  
Undetermined

**Action Required**  
Proceed with admin screening

**Additional Comments**

**SAVE CHANGES**

Figure 7: Receiving Community Care Admin Screening Dashboard Screen (2 of 2)

**Consult Toolbox** What's New Help

**Veteran Name**  
PATIENT, TEST  
**Date of Birth**  
Jan 1, 1900 (121)

**Residential Address**  
611 1ST ST W  
Morton, MN 56270  
(38.8943, -77.438683)

**Consult to Service/Specialty**  
Community Care-Audiology  
**Urgency**  
Routine  
**CID**  
08/02/2021  
**Seen As**  
Outpatient

**Community Care Eligibility**  
BMI Need for an attendant

**RECEIVE CC CONSULT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening**
- Clinical Triage
- DoD Consult
- View Consult History
- User Settings

Does the consult specify any of the following complex/chronic conditions or services? (required)

-- Select --

Does the consult specify any of the following basic services? (required)

-- Select --

**CAN Score**  
Unable to retrieve information from Clinical Data Warehouse

**Manual CAN Score (required)**

☐ 0 to 74

☐ 75 to 90

☐ Over 90

☒ Not available

**Action Required**  
Proceed with admin screening

**Additional Comments**

**SAVE CHANGES**

- **Prior Admin Screening**
- **Update prior Admin Screening information**
- **Urgent: appointment needed within 48 hours**—if urgent care coordination is required, forward immediately for clinical triage. (If within 48 hours, skip remaining questions and forward for clinical triage.)
- **Does the consult specify any of the following complex/chronic conditions or services?** — if the consult specifies any complex conditions or services, select one of the following options from the drop-down menu.
  - **Chronic Heart Failure**
  - **Chronic Obstructive Pulmonary Disease/Pneumonia**
  - **Coronary Artery Bypass (CABG)**

Authorized Use Only

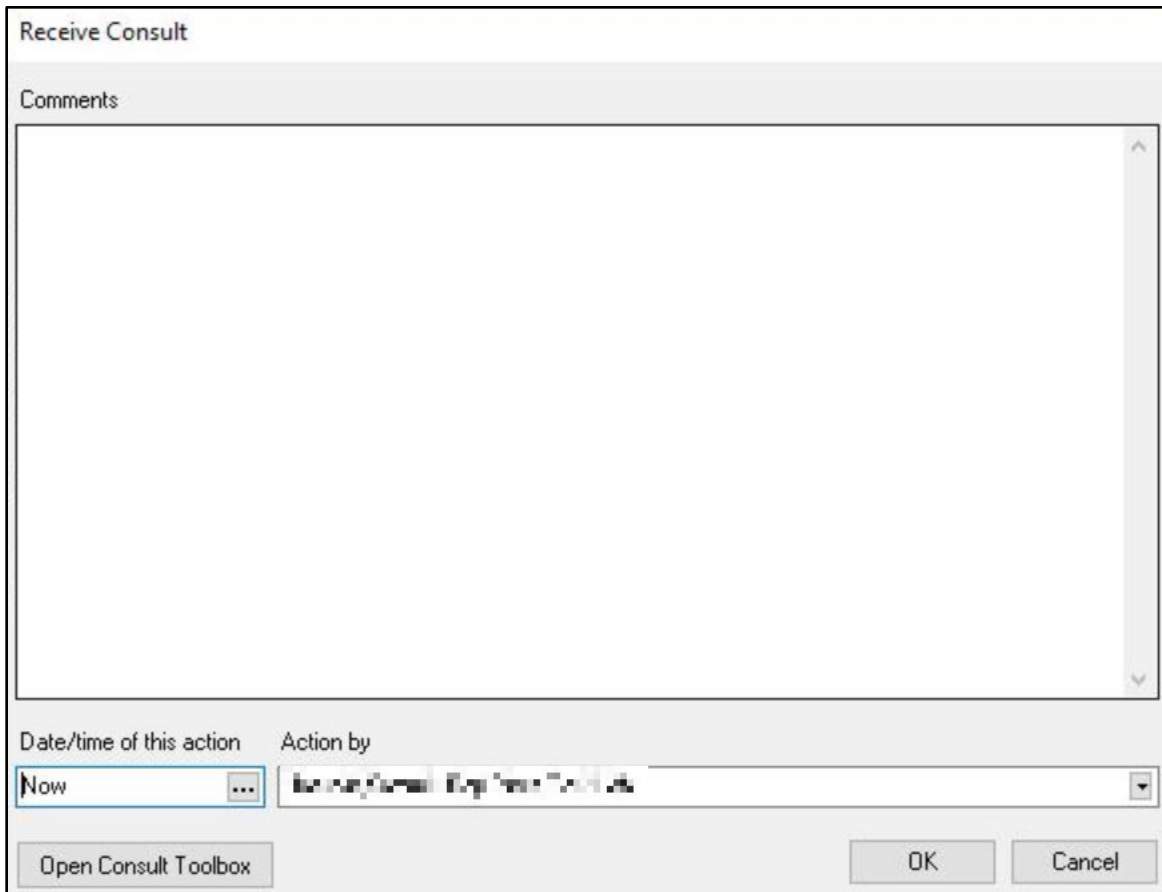
- **Inpatient Hospitalization (any cause)**
- **New Cancer Diagnosis**
- **Outpatient Surgery**
- **None of the above**
- **Does the consult specify any of the following basic services?** — if the consult specifies basic services, select the applicable service from the drop-down menu.
  - **Cervical cancer screening (PAP Test)**
  - **Complimentary and integrated medicine**
  - **Direct scheduling**
  - **Low dose CT scans**
  - **Routine laboratory and/or radiological service**
  - **Routine mammography**
  - **Routine screening colonoscopy**
  - **Routine therapeutic services (Dialysis, OT, PT, RT)**
  - **None of the above**
- **CAN Score** — Care Assessment Needs (CAN) Scores is an important component to the Screening/Triage process providing a standardized evidence-based measure of Veteran risk. CAN Scores measure the probability of inpatient admission or death within a specified period of time (1 year) in percentage form. CTB automatically retrieves the CAN Score for a patient from the CDW via the CAN Score service.  
If the CAN Score service is unavailable or does not exist for a patient, manual entry of the CAN Score is enabled.
- **Manual CAN Score (required)** - *This option is not available for the MSA/Clerk user role.* To access a Veteran's CAN Score manually, the staff are required to access VHA Support Service Center (VSSC). If CAN Score is known, make the appropriate selection, or if not available, select **No CAN Score Available** from the following choices:
  - **0 to 74**
  - **75 to 90**
  - **Over 90**
  - **Not available**
- **Admin Care Coordination Level**
- **Clinical Triage**
- **Action Required**
- **Scheduling Staff Member You Will Alert**
- **Clinical Staff Member You Will Alert**
- **Additional Comments** – Field to enter additional comments.

#### **4.4.2.5.1. Receiving Community Care Admin Screening Workflow**

1. From the **Action** menu, select **Consult Tracking...**, and then select **Receive**. The **Receive Consult** dialog box opens.

Authorized Use Only

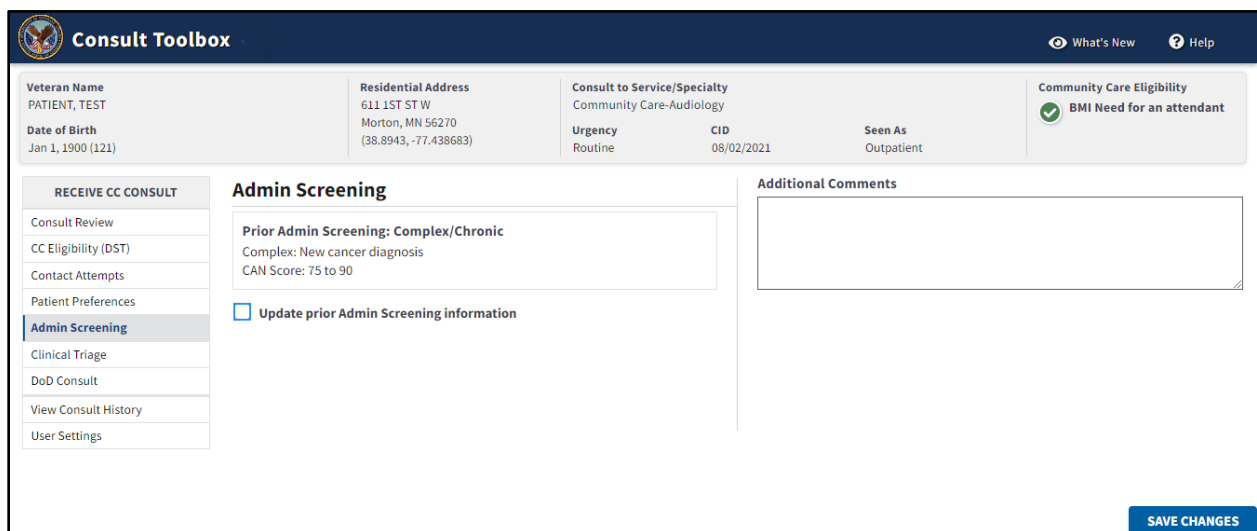
**Figure 8: Receive Consult Dialog Box**



The dialog box is titled "Receive Consult". It features a large text area for "Comments" with a vertical scrollbar. Below the comments area, there are two fields: "Date/time of this action" with a dropdown menu showing "Now" and a three-dot menu icon, and "Action by" with a text input field containing a blurred name and a dropdown arrow. At the bottom, there are three buttons: "Open Consult Toolbox" on the left, and "OK" and "Cancel" on the right.

2. Click **Open Consult Toolbox**. The **Receive CC Consult** dashboard opens.
3. From the workflow menu, select **Admin Screening**. The **Receive Community Care Admin Screening Dashboard Screen** displays.

**Figure 9: Receiving Community Care Admin Screening Dashboard Screen**



The dashboard is titled "Consult Toolbox" and includes a header with a logo, "What's New", and "Help". The main content area is divided into several sections. On the left, a sidebar menu lists various options, with "Admin Screening" highlighted. The main area displays patient information: "Veteran Name" (PATIENT, TEST), "Date of Birth" (Jan 1, 1900 (121)), "Residential Address" (611 1ST ST W, Morton, MN 56270, (38.8943, -77.438683)), "Consult to Service/Specialty" (Community Care-Audiology), "Urgency" (Routine), "CID" (08/02/2021), "Seen As" (Outpatient), and "Community Care Eligibility" (BMI Need for an attendant). Below this, the "Admin Screening" section shows "Prior Admin Screening: Complex/Chronic" with details "Complex: New cancer diagnosis" and "CAN Score: 75 to 90". There is a checkbox labeled "Update prior Admin Screening information". To the right, there is a large text area for "Additional Comments". At the bottom right, there is a "SAVE CHANGES" button.

Authorized Use Only

- To update prior information, select the **Update prior Admin Screening information** check box. The **Receiving Community Care Admin Screening Options** display.

**Figure 10: Receiving Community Care Admin Screening Options**

**Consult Toolbox**

**Veteran Name:** PATIENT, TEST  
**Date of Birth:** Jan 1, 1900 (121)

**Residential Address:** 611 1ST ST W  
Morton, MN 56270  
(38.8943, -77.438683)

**Consult to Service/Specialty:** Community Care-Audiology  
**Urgency:** Routine  
**CID:** 08/02/2021  
**Seen As:** Outpatient

**Community Care Eligibility:** BMI Need for an attendant

**RECEIVE CC CONSULT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening**
- Clinical Triage
- DoD Consult
- View Consult History
- User Settings

**Admin Screening**

**Prior Admin Screening: Complex/Chronic**  
Complex: New cancer diagnosis  
CAN Score: 75 to 90

☒ **Update prior Admin Screening information**

☐ **Urgent - appointment needed within 48 hours**

**Does the consult specify any of the following complex/chronic conditions or services? (required)**  
-- Select --

**Does the consult specify any of the following basic services? (required)**  
-- Select --

**Administrative Screening for Care Coordination and Case Management - not intended for authorization**

**Admin Care Coordination Level:** Undetermined

**Clinical Triage:** Undetermined

**Action Required:** Proceed with admin screening

**Additional Comments:**

**SAVE CHANGES**

- Select the **Urgent: appointment needed within 48 hours** check box if urgent care coordination is required, this should be forwarded immediately for clinical triage. (If within 48 hours, skip remaining questions and forward for clinical triage.)
- From the **Does the consult specify any of the following complex/chronic conditions or services?** drop-down menu, select if the consult specifies any complex conditions or services.
- From the **Does the consult specify any of the following basic services?** drop-down menu, select if the consult specifies basic services.
- If the CAN Score service is unavailable or a CAN Score does not exist for a patient, manual entry of the CAN Score is enabled. From the **Manual CAN Score (required)** section, select the CAN Score. *This option is not available for the MSA/Clerk user role.*
- In the **Additional Comments** section, enter any comments pertaining to the consult.
- Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
- Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

#### **4.4.2.6. Receiving Community Care Clinical Triage**

If the level of care coordination determined in the administrative screening section is not basic, the administrative staff member will alert a clinical care coordinator to complete the clinical triage section below. The clinical section consists of questions regarding the Veteran's comorbidities, social factors, and need for assistance with Activities of Daily Living (ADLs). There is also a drop-down menu which the clinical care coordinator may fill out to override the results of the tool using clinical evidence-based judgment.

**NOTE:** If clinical triage has already been performed, it will show. Also, if care coordination has already been assigned by Administrative screening that will also show.

**NOTE:** Clinical Triage is viewable to the MSA/Clerk user role, but they will not be able to edit.

**Figure 11: Receiving Community Care Clinical Triage Dashboard Screen (1 of 2)**

**Figure 12: Receiving Community Care Clinical Triage Dashboard Screen (2 of 2)**

- **Admin Screening Results** - The Screening/Triage tool will recommend a care coordination level once the following items are populated:
- **Veteran Comorbidities** - select **Yes** or **No** if based on your review of Veteran information and clinical judgement if the Veteran will require additional care coordination/support during this episode of care due to two or more comorbidities.
- **Psychosocial Factors:**— select **Yes** or **No** if based on your review of the Veteran information and clinical judgement, if the Veteran will require additional care coordination/support during this episode of care due to any psychosocial factors (e.g. Dementia, Depression, Homelessness, Lack of Caregiver Support).

Authorized Use Only

- **Activities of Daily Life, or ADL support:** – select **Yes** or **No** if based on your review of Veteran information and clinical judgement, if the Veteran will require ADL support.
- **Clinical Coordination Level** - the tool will calculate a level of care coordination based on the answers in the administrative screening and clinical triage sections as displayed below:
- **Manual Adjustment of Clinical Care Coordination Level** - Based on clinical judgment, the clinical care coordinator may override the automated result. If manual adjustment is required for the level of care coordination, select the revised level in the drop-down menu along with the reason for adjustment in the textbox below.
  - **Basic**
  - **Moderate**
  - **Complex/Chronic**
  - **Urgent**
- **Clinical Reason for Manual Adjustment** -
- **Scheduling staff member you will alert** - Name of the scheduling staff member.
- **Additional comments** – Field to enter additional comments.

#### 4.4.2.6.1. Receiving Community Care Clinical Triage Workflow

1. From the **Action** menu, select **Consult Tracking...**, and then select **Receive**. The **Receive Consult** dialog box opens.

**Figure 13: Receive Consult Dialog Box**

The screenshot shows a 'Receive Consult' dialog box. It features a 'Comments' section with a large text area for input. Below this, there are two fields: 'Date/time of this action' with a dropdown menu currently showing 'Now' and a button '...', and 'Action by' with a dropdown menu. At the bottom of the dialog are three buttons: 'Open Consult Toolbox', 'OK', and 'Cancel'.

2. Click **Open Consult Toolbox**. The **Receive CC Consult** dashboard opens.

- From the workflow menu, select **Clinical Triage**. The **Receive Community Care Clinical Triage Dashboard Screen** displays.

**Figure 14: Receiving Community Care Clinical Triage Dashboard Screen**

- To update the information, select the **Update prior Clinical Triage information** check box. The **Receiving Community Care Clinical Triage Dashboard Screen options** display.

**Figure 15: Receiving Community Care Clinical Triage Dashboard Screen Options**

- From the **Veteran Comorbidities** drop-down menu, select **Yes** or **No** if based on your review of Veteran information and clinical judgement if the Veteran will require additional care coordination/support during this episode of care due to two or more comorbidities.
- From the **Psychosocial Factors** drop-down menu, select **Yes** or **No** if based on your review of the Veteran information and clinical judgement, if the Veteran will require additional care coordination/support during this episode of care due to any psychosocial factors (e.g. Dementia, Depression, Homelessness, Lack of Caregiver Support).

Authorized Use Only



7. From the **Activities of Daily Life, or ADL support** drop-down menu, select **Yes** or **No** if based on your review of Veteran information and clinical judgement, if the Veteran will require ADL support.
8. CTB will calculate a level of care coordination based on the answers in the administrative screening and clinical triage sections.
9. If it is determined that Clinical Triage is not required, enter the staff member name in the **Scheduling Staff Member You Will Alert** field.
10. In the **Additional Comments** section, enter any comments pertaining to the consult.
11. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
12. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

#### 4.4.2.7. Receiving Community Care Community Care DoD Consult

For additional information please refer to the CTB Help Files.

## 4.5. Forward Consult

At present forwarding only supports forwarding to Community Care.

### 4.5.1. Forward Consult to CC Activities

#### 4.5.1.1. Forward Consult to Community Care

Figure 16: Forward Consult to Community Care Dashboard Screen

Consult Toolbox

**Consult Toolbox** What's New Help

Veteran Name: DSTSEVEN, CHYSHRSEVEN  
 Date of Birth: Mar 29, 1955 (66)  
 Residential Address: 287 West St, Rocky Hill, CT 06067 (41.65342, -72.65031)  
 Consult to Service/Specialty: AUDIOLOGY  
 Urgency: Routine  
 CID: 07/30/2021  
 Seen As: Inpatient  
 Community Care Eligibility: ✓ BMI Difficulty in traveling

**FORWARD CONSULT TO CC**

**Forward Consult**

CC Eligibility (DST)

Patient Preferences

View Consult History

User Settings

**Forward To CC Page**

Consult has been reviewed for clinical appropriateness (required)

☐ Yes ☐ No

Veteran's Participation Preference (required)

☒ Opt-IN for Community Care

☐ Opt-OUT of Community Care

☐ TBD/Deferred

Basis for Veteran's Preference (optional)

Existing relationship with provider

Standardized Episode of Care (SEOC)

-- Select --

**Additional Comments**

**SAVE CHANGES**

Close Consult Toolbox

- **Consult has been reviewed for clinical appropriateness (required)**
  - Yes

Authorized Use Only

- No
- **Veteran's Participation Preferences (required)** – This is only displayed when Community Care Eligibility has been established.
  - **Opt-IN for Community Care** – Veteran elects care in the community.
  - **Opt-OUT of Community Care** – Veteran elects to remain within the VA for care.
  - **TBD/Deferred** – Veteran has not decided or the information is unknown.
- **Basis for Veteran's Preference**
  - Existing relationship with provider
  - Shorter wait time
  - Shorter drive time
  - Care preference
  - Scheduling flexibility
- **Standardized Episode of Care (SEOC)** – This field displays when Opt-In for Community Care or TBD/Deferred is selected.
- **Additional Comments** – Field to enter additional comments.

#### 4.5.1.1.1. Forward Consult Workflow

1. From the **Action** menu, select **Consult Tracking...**, and then select **Forward Consult**. The **Forward Consult** dialog box opens.

Figure 17: Forward Consult Dialog Box

2. Click **Open Consult Toolbox**. The **Forward Consult to CC** dashboard opens.

Authorized Use Only

3. From the workflow menu, select **Forward Consult**. The **Forward Consult to Community Care Dashboard Screen** displays.

**Figure 18: Forward Consult to Community Care Dashboard Screen**

4. From the Consult has been reviewed for clinical appropriateness section, select **Yes** or **No**.
5. If Community Care Eligibility has been established, from the **Veteran's Participation Preferences** section, select the Veteran's preference.
  - a. If the Veteran has elected to Opt-IN, from the **Basis for Veteran's Preference** drop-down menu, select the reason for their preference.
  - b. From the **Standardized Episode of Care (SEOC)** drop-down menu, select the SEOC.
6. In the **Additional Comments** section, enter any comments pertaining to the consult.
7. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
8. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

#### **4.5.1.2. Forward Community Care CC Eligibility (DST) Workflow**

For additional information please refer to the CTB Help Files.

#### **4.5.1.3. Forward Community Care Patient Preferences Workflow**

For additional information please refer to the CTB Help Files.

## 4.6. Add Comment to Consult

There are many activities that can take place that should be documented in the medical record, as this is the official Veteran record, and needs to be tracked.

### 4.6.1. VA Consult Comment

#### 4.6.1.1. VA Consult Comment Consult Review Workflow

For additional information please refer to the CTB Help Files.

#### 4.6.1.2. VA Consult Comment CC Eligibility (DST) Workflow

For additional information please refer to the CTB Help Files.

#### 4.6.1.3. VA Consult Comment Contact Attempts Workflow

For additional information please refer to the CTB Help Files.

#### 4.6.1.4. VA Consult Comment Patient Preferences Workflow

For additional information please refer to the CTB Help Files.

### 4.6.2. Community Care Consult Comment

#### 4.6.2.1. Community Care Consult Comment Consult Review

Figure 19: CC Consult Comment Consult Review Dashboard Screen

The screenshot shows the 'Consult Toolbox' interface. At the top, there's a header with the VA logo and 'Consult Toolbox' text. Below this is a patient information section with fields for Veteran Name (DSTSEVEN, CHYSHRSEVEN), Residential Address (287 West St, Rocky Hill, CT 06067), Consult to Service/Specialty (COMMUNITY CARE-CARDIOLOGY), Urgency (Routine), CID (08/03/2021), Seen As (Inpatient), and Community Care Eligibility (Service not available at VA). A left sidebar contains a menu with options like 'CC CONSULT COMMENT', 'Consult Review', 'CC Eligibility (DST)', 'Contact Attempts', 'Patient Preferences', 'Admin Screening', 'Clinical Triage', 'DoD Consult', 'Appointment Tracking', 'Request for Service (RFS)', 'Consult Completion', 'View Consult History', and 'User Settings'. The main content area is titled 'Consult Review' and includes sections for 'COVID-19 Scheduling Triage (required)' with radio button options for Priority 1 through 4, 'Community Care Program (required)' with a dropdown menu, a checkbox for 'Consult related to previous referral (RFS)', 'DOA Medical Services List Reviewed' with radio button options, and 'Delegation of Authority - Clinical Review Method' with a dropdown menu. On the right side, there's a 'Cancellation Authorization (required)' section with radio button options, a 'Responsible for Scheduling (required)' dropdown, a 'Standardized Episode of Care (SEOC)' dropdown with a 'View SEOC' button, an 'HSRM CC Referral' section with a checkbox for 'Send consult to HSRM as an approved referral', and an 'Additional Comments' text area. At the bottom right, there are 'SAVE CHANGES' and 'Close Consult Toolbox' buttons.

- **COVID-19 Scheduling Triage (required)** - *This option is not available for the MSA/Clerk user role.*
  - **Priority 1 – Proceed with scheduling** - do not wait until normal operations, schedule appointment now.

Authorized Use Only

- **Priority 2 – Schedule after clinical review** - first group to schedule when normal operations begin. Community Care consults should also be scheduled based on local market availability.
- **Priority 3 – Schedule per department policy, if locally defined** - optional, but a way to separate less urgent consults from the Priority 2. Your department can define criteria how to separate 2 from 3.
- **Priority 4 – Schedule per department policy, if locally defined** - optional, a way to separate non-urgent consults from the Priority 3. Again, you can define which ones belong to this category or if you use it at all.
- **Community Care Program (required)**

**Figure 20: Community Care Program Menu Options**

The image shows a screenshot of a software interface with a dropdown menu. The menu is currently open, displaying a list of options. The top of the menu has a blue header with the text "-- Select --". Below this, the following options are listed in a standard black font:

- Authorized referral-1703
- Veterans Care Agreement (VCA)-1703A
- Beneficiary Travel-38 USC 111
- Caregiver-1720G
- Dental-1712
- Department of Defense-8111
- Emergency NSC-1725
- Emergency SC-1728
- Indian Health Service-38 USC 8153 (25 USC 1645)
- In Vitro Fertilization/ART-1703
- Newborn-1786
- Alternatives to nursing home care-1720C
- Respite Care-1720B
- Transfers for nursing home/adult day care-1720
- Tx/Rehab for drug or alcohol dependency-1720A
- Tribal Health Program-38 USC 8153 (25 USC 1647)
- Urgent Care-1725A
- Local Contract-8153
- Other (explanation required)

- **Consult related to previous referral (RFS)**
- **DOA Medical Services List Reviewed**
  - **Clinical review required**
  - **Does not require clinical review**
- **Delegation of Authority – Clinical Review Method** - *This option is not available for the MSA/Clerk user role.*
  - **MCG guidelines**
  - **InterQual criteria**
  - **Chief of Staff approved Protocol**
- **Preferred modality options for this consult** - *This option is not available for the MSA/Clerk user role.*
  - **Any modality/patient choice**

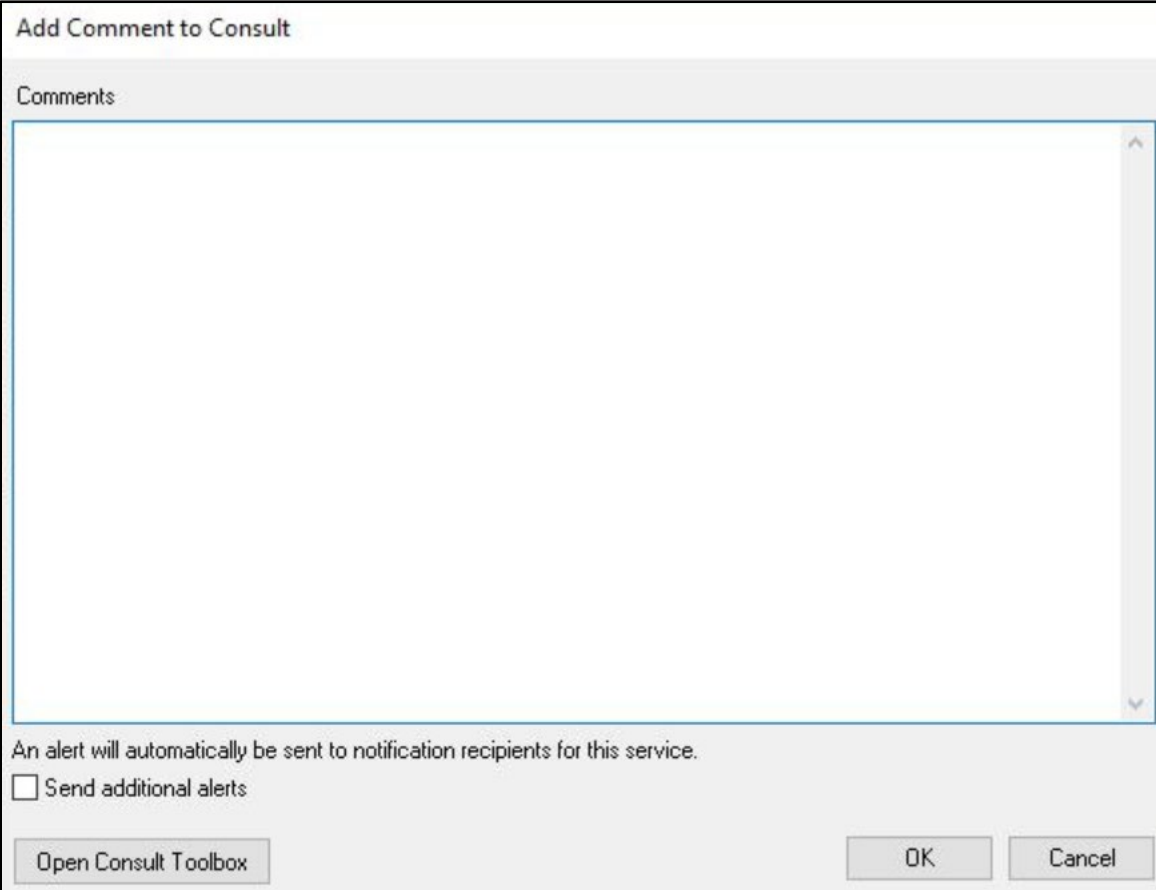
Authorized Use Only

- **In-person appointment**
- **Telephone appointment** - Telephone Appointment may be offered to the Veteran.
- **Video appointment** - VA Video Connect (VVC) appointment may be offered to the Veteran.
- **Cancellation authorization (required)**- *This option is not available for the MSA/Clerk user role.*
  - **High risk consult – extra scheduling effort warranted** - this will flag this consult as having a medically high-risk condition that warrants additional calls to the Veteran beyond the mandated minimum necessary effort. It also allows the receiving service to flag certain consults for closer follow up when the Veteran fails to keep appointments. Each service may define what high-risk means to them. This is simply a way of segregating higher risk consults from the rest and notifying the staff to expend additional effort.
    - **Extra scheduling effort** - allows the reviewer to specify what additional effort they would like. In addition to the selection of options, the user may type in other instructions.
      - **Explanation (required)**
  - **Cancel after mandated scheduling effort**
  - **Low risk clinic – may cancel after one missed appointment** - An additional option for low risk clinics exists for cancellation after one missed appointment. This screen auto populates from settings described above.
- **Responsible for Scheduling (required)**
  - **VA Facility CC Office**
  - **Veteran self-schedules**
  - **Community provider schedules**
  - **Community care contractor schedules**
- **Standardized Episode of Care (SEOC)**
- **HSRM CC Referral**
  - **Send consult to HSRM as an approved referral**
- **Additional Comments** – Field to enter additional comments.

#### 4.6.2.1.1. Community Care Consult Comment Consult Review Workflow

1. From the **Action** menu in CPRS, select **Consult Tracking...**, and then select **Add Comment**. The **Add Comment to Consult** dialog box opens.

**Figure 21: Add Comment to Consult Dialog Box**



Add Comment to Consult

Comments

An alert will automatically be sent to notification recipients for this service.

☐ Send additional alerts

Open Consult Toolbox

OK

Cancel

2. Click **Open Consult Toolbox**. The **CC Consult Comment** dashboard opens.
3. From the workflow menu, select **Consult Review**. The **CC Consult Comment Consult Review Dashboard Screen** displays.

**Figure 22: CC Consult Comment Consult Review Dashboard Screen**

4. From the **COVID-19 Scheduling Triage** section, select the priority level. *This option is not available for the MSA/Clerk user role.*
5. From the **Community Care Program** drop-down menu, select the Community Care program for the consult.
6. Select the **Consult related to previous referral (RFS)** check box if the consult is related to the previous referral.
7. From the **DOA Medical Services List Reviewed** section, select if clinical review is required or not.
8. From the **Delegation of Authority – Clinical Review Method** drop-down menu, select clinical review method. *This option is not available for the MSA/Clerk user role.*
9. From the **Preferred modality options for this consult** section, the type of appointment options for the consult. *This option is not available for the MSA/Clerk user role.*
10. From the **Cancellation authorization (required)** section, select the option. If **High risk consult – extra scheduling effort warranted** is selected, you will be required to select an option from the **Extra scheduling effort** drop-down menu. Selecting Other will require you to enter an explanation in the field provided. *The Cancellation authorization (required) section is not available for the MSA/Clerk user role.*
11. From the **Responsible for Scheduling** drop-down menu, select who is responsible for scheduling the consult.
12. In the **Additional Comments** section, enter any comments pertaining to the consult.
13. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.



14. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

#### 4.6.2.2. Community Care Consult Comment CC Eligibility (DST) Workflow

For additional information please refer to the CTB Help Files.

#### 4.6.2.3. Community Care Consult Comment Contact Attempts Workflow

For additional information please refer to the CTB Help Files.

#### 4.6.2.4. Community Care Consult Comment Patient Preferences Workflow

For additional information please refer to the CTB Help Files.

#### 4.6.2.5. Community Care Consult Comment Admin Screening

Figure 23: CC Consult Comment Admin Screening Dashboard Screen

**Consult Toolbox**

**What's New** **Help**

**Veteran Name:** DSTSEVEN, CHYSHRSEVEN  
**Date of Birth:** Mar 29, 1955 (66)  
**Residential Address:** 287 West St, Rocky Hill, CT 06067 (41.65342, -72.65031)  
**Consult to Service/Specialty:** COMMUNITY CARE-CARDIOLOGY  
**Urgency:** Routine **CID:** 08/03/2021 **Seen As:** Inpatient  
**Community Care Eligibility:** BMI Need for an attendant

**CC CONSULT COMMENT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening**
- Clinical Triage
- DoD Consult
- Appointment Tracking
- Request for Service (RFS)
- Consult Completion
- View Consult History
- User Settings

**Admin Screening**

**Prior Admin Screening:** Complex/Chronic  
**CAN Score:** Over 90

☒ **Update prior Admin Screening information**

☐ **Urgent - appointment needed within 48 hours**

**Does the consult specify any of the following complex/chronic conditions or services? (required)**

-- Select --

**Does the consult specify any of the following basic services? (required)**

-- Select --

**CAN Score**  
 Unable to retrieve information from Clinical Data Warehouse

**Manual CAN Score (required)**

**Administrative Screening for Care Coordination and Case Management - not intended for authorization**

**Admin Care Coordination Level**  
 Complex/Chronic

**Clinical Triage**  
 Required

**Action Required**  
 Proceed with clinical triage

**Additional Comments**

**SAVE CHANGES**

**Close Consult Toolbox**

- **Update prior Admin Screening information**
- **Urgent: appointment needed within 48 hours**—if urgent care coordination is required, this should be forwarded immediately for clinical triage. (If within 48 hours, skip remaining questions and forward for clinical triage.)
- **Does the consult specify any of the following complex/chronic conditions or services?** — if the consult specifies any complex conditions or services, select one of the following options from the drop-down menu.
  - **Chronic Heart Failure**
  - **Chronic Obstructive Pulmonary Disease/Pneumonia**
  - **Coronary Artery Bypass (CABG)**
  - **Inpatient Hospitalization (any cause)**

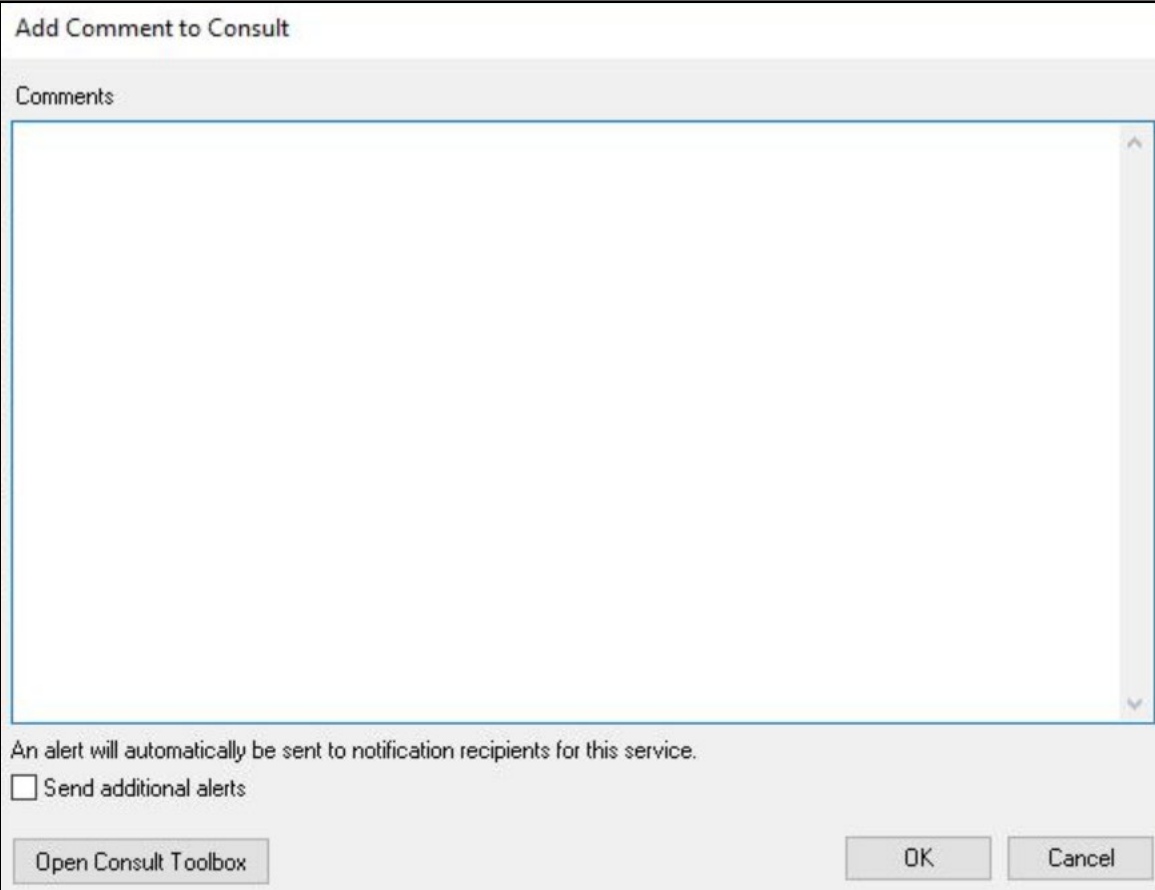
Authorized Use Only

- **New Cancer Diagnosis**
- **Outpatient Surgery**
- **None of the above**
- **Does the consult specify any of the following basic services?** — if the consult specifies basic services, select the applicable service from the drop-down menu.
  - **Cervical cancer screening (PAP Test)**
  - **Complimentary and integrated medicine**
  - **Direct scheduling**
  - **Low dose CT scans**
  - **Routine laboratory and/or radiological service**
  - **Routine mammography**
  - **Routine screening colonoscopy**
  - **Routine therapeutic services (Dialysis, OT, PT, RT)**
  - **None of the above**
- **CAN Score** — CAN Scores are an important component to the Screening/Triage process providing a standardized evidence-based measure of Veteran risk. CAN Scores measure the probability of inpatient admission or death within a specified period of time (1 year) in percentage form. Toolbox automatically retrieves the CAN Score for a patient from the CDW via the CAN Score service.  
 If the CAN Score service is unavailable or a CAN Score does not exist for a patient, manual entry of the CAN Score is enabled.
- **Manual CAN Score (required)** - *This option is not available for the MSA/Clerk user role.* To access a Veteran's CAN Score manually, the staff are required to access VHA Support Service Center (VSSC). If CAN Score is known, make the appropriate selection, if not available, select **No CAN Score Available** from the following choices:
  - **0 to 74**
  - **75 to 90**
  - **Over 90**
  - **Not available**
- **Admin Care Coordination Level**
- **Clinical Triage**
- **Action Required**
- **Additional Comments** – Field to enter additional comments.

#### 4.6.2.5.1. Community Care Consult Comment Admin Screening Workflow

1. From the **Action** menu in CPRS, select **Consult Tracking...**, and then select **Add Comment**. The **Add Comment to Consult** dialog box opens.

**Figure 24: Add Comment to Consult Dialog Box**



Add Comment to Consult

Comments

An alert will automatically be sent to notification recipients for this service.

☐ Send additional alerts

Open Consult Toolbox

OK

Cancel

2. Click **Open Consult Toolbox**. The **CC Consult Comment** dashboard opens.
3. From the workflow menu, select **Admin Screening**. The **CC Consult Comment Admin Screening Dashboard Screen** displays.

**Figure 25: CC Consult Comment Admin Screening Dashboard Screen**

**Consult Toolbox**

**What's New** **Help**

**Veteran Name**  
DSTSEVEN, CHYSHRSEVEN

**Residential Address**  
287 West St  
Rocky Hill, CT 06067  
(41.65342, -72.65031)

**Consult to Service/Specialty**  
COMMUNITY CARE-CARDIOLOGY

**Urgency**  
Routine

**CID**  
08/03/2021

**Seen As**  
Inpatient

**Community Care Eligibility**  
BMI Need for an attendant

**CC CONSULT COMMENT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening**
- Clinical Triage
- DoD Consult
- Appointment Tracking
- Request for Service (RFS)
- Consult Completion
- View Consult History
- User Settings

**Admin Screening**

Prior Admin Screening: Complex/Chronic  
CAN Score: Over 90

☐ Update prior Admin Screening information

**Additional Comments**

**SAVE CHANGES**

Close Consult Toolbox

- To update the prior information, select the **Update prior Admin Screening information** check box. The CC Consult Comment Admin Screening Dashboard Screen options display.

**Figure 26: CC Consult Comment Admin Screening Dashboard Screen Options**

**Consult Toolbox**

**What's New** **Help**

**Veteran Name**  
DSTSEVEN, CHYSHRSEVEN

**Residential Address**  
287 West St  
Rocky Hill, CT 06067  
(41.65342, -72.65031)

**Consult to Service/Specialty**  
COMMUNITY CARE-CARDIOLOGY

**Urgency**  
Routine

**CID**  
08/03/2021

**Seen As**  
Inpatient

**Community Care Eligibility**  
BMI Need for an attendant

**CC CONSULT COMMENT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening**
- Clinical Triage
- DoD Consult
- Appointment Tracking
- Request for Service (RFS)
- Consult Completion
- View Consult History
- User Settings

**Admin Screening**

Prior Admin Screening: Complex/Chronic  
CAN Score: Over 90

☒ Update prior Admin Screening information

☐ Urgent - appointment needed within 48 hours

Does the consult specify any of the following complex/chronic conditions or services? (required)

-- Select --

Does the consult specify any of the following basic services? (required)

-- Select --

**CAN Score**  
Unable to retrieve information from Clinical Data Warehouse

**Manual CAN Score (required)**  
0

**Administrative Screening for Care Coordination and Case Management - not intended for authorization**

**Admin Care Coordination Level**  
Complex/Chronic

**Clinical Triage**  
Required

**Action Required**  
Proceed with clinical triage

**Additional Comments**

**SAVE CHANGES**

Close Consult Toolbox

- Select the **Urgent - appointment needed within 48 hours** check box if urgent care coordination is required, this should be forwarded immediately for clinical triage. (If within 48 hours, skip remaining questions and forward for clinical triage.)

Authorized Use Only

6. From the **Does the consult specify any of the following complex/chronic conditions or services?** drop-down menu, select if the consult specifies any complex conditions or services.
7. From the **Does the consult specify any of the following basic services?** drop-down menu, select if the consult specifies basic services.
8. If the CAN Score service is unavailable or a CAN Score does not exist for a patient, manual entry of the CAN Score is enabled. From the **Manual CAN Score (required)** section, select the CAN Score. *This option is not available for the MSA/Clerk user role.*  
**Admin Care Coordination Level**
9. If it is determined that Clinical Triage is not required, enter the staff member name in the **Scheduling Staff Member You Will Alert** field.
10. In the **Additional Comments** section, enter any comments pertaining to the consult.
11. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
12. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.


#### **4.6.2.6. Community Care Consult Comment Clinical Triage**


If the level of care coordination determined in the administrative screening section is not basic, the administrative staff member is to alert a clinical care coordinator to complete the clinical triage section below. The clinical section consists of questions regarding the Veteran's comorbidities, social factors, and need for assistance with Activities of Daily Living (ADLs). There is a drop-down menu the clinical care coordinator may fill out to override the results of the tool using clinical evidence-based judgment.

**NOTE:** *If clinical triage has already been performed, it will show. Also, if care coordination has already been assigned by Administrative screening that will also show.*

Figure 27: CC Consult Comment Clinical Triage Dashboard Screen

Consult Toolbox

 **Consult Toolbox** [What's New](#) [Help](#)

<b>Veteran Name</b> DSTSEVEN, CHYSHRSEVEN	<b>Residential Address</b> 287 West St Rocky Hill, CT 06067 (41.65342, -72.65031)	<b>Consult to Service/Specialty</b> COMMUNITY CARE-CARDIOLOGY	<b>Community Care Eligibility</b>  <b>BMI Need for an attendant</b>
<b>Date of Birth</b> Mar 29, 1955 (66)	<b>Urgency</b> Routine	<b>CID</b> 08/03/2021	<b>Seen As</b> Inpatient

**CC CONSULT COMMENT**  
[Consult Review](#)  
[CC Eligibility \(DST\)](#)  
[Contact Attempts](#)  
[Patient Preferences](#)  
[Admin Screening](#)  
**[Clinical Triage](#)**  
[DoD Consult](#)  
[Appointment Tracking](#)  
[Request for Service \(RFS\)](#)  
[Consult Completion](#)  
[View Consult History](#)  
[User Settings](#)

### Clinical Triage

**Admin Screening: Complex/Chronic**  
 CAN Score: Over 90

**Prior Clinical Triage: Complex/Chronic**  
 Comorbidities: No Psychosocial: No ADL Support: Yes


☒ **Update prior Clinical Triage Information**


**Veteran Comorbidities (required)**  
 Based on your review of Veteran information and clinical judgement, will the Veteran require additional care coordination/support during this episode due to two or more comorbidities?

**Psychosocial Factors (required)**  
 Based on your review of Veteran information and clinical judgment, will the Veteran require additional care coordination/support during this episode due to any psychosocial factors? (e.g. Dementia, Depression, Homelessness,

**Clinical Care Coordination Level**  
**Complex/Chronic**  
☒ **Manual Adjustment of Clinical Care Coordination Level (required)**  
 Based on review of Veteran information and clinical judgment, the level of care coordination should be manually adjusted to:  
☐ Basic  
☐ Moderate  
☐ Complex/Chronic  
☐ Urgent  
**Scheduling staff member you will alert**  
  
  
**Additional Comments**

Consult Toolbox

 **Consult Toolbox** [What's New](#) [Help](#)

<b>Veteran Name</b> DSTSEVEN, CHYSHRSEVEN	<b>Residential Address</b> 287 West St Rocky Hill, CT 06067 (41.65342, -72.65031)	<b>Consult to Service/Specialty</b> COMMUNITY CARE-CARDIOLOGY	<b>Community Care Eligibility</b>  <b>BMI Need for an attendant</b>
<b>Date of Birth</b> Mar 29, 1955 (66)	<b>Urgency</b> Routine	<b>CID</b> 08/03/2021	<b>Seen As</b> Inpatient

**CC CONSULT COMMENT**  
[Consult Review](#)  
[CC Eligibility \(DST\)](#)  
[Contact Attempts](#)  
[Patient Preferences](#)  
[Admin Screening](#)  
**[Clinical Triage](#)**  
[DoD Consult](#)  
[Appointment Tracking](#)  
[Request for Service \(RFS\)](#)  
[Consult Completion](#)  
[View Consult History](#)  
[User Settings](#)

### Clinical Triage

**Admin Screening: Complex/Chronic**  
 CAN Score: Over 90

**Prior Clinical Triage: Complex/Chronic**  
 Comorbidities: No Psychosocial: No ADL Support: Yes

☐ **Update prior Clinical Triage Information**

**Additional Comments**

- **Admin Screening Results** - The Screening/Triage tool will recommend a care coordination level once the following items are populated:
- **Veteran Comorbidities** - select yes or no if based on your review of Veteran information and clinical judgement that the Veteran will require additional care coordination/support during this episode of care due to two or more comorbidities.
- **Psychosocial Factors** - select yes or no if based on your review of the Veteran information and clinical judgement that the Veteran will require additional care

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coordination/support during this episode of care due to any psychosocial factors (e.g. Dementia, Depression, Homelessness, Lack of Caregiver Support).

- **Activities of Daily Life, or ADL support:** –select yes or no if based on your review of Veteran information and clinical judgement that the Veteran will require ADL support.
- **Clinical Coordination Level** - the tool will calculate a level of care coordination based on the answers in the administrative screening and clinical triage sections as displayed below:
- **Manual Adjustment of Clinical Care Coordination Level** - Based on clinical judgment, the clinical care coordinator may override the automated result. If manual adjustment is required for the level of care coordination, select the revised level in the drop-down menu along with the reason for adjustment in the text box below.
  - **Basic**
  - **Moderate**
  - **Complex/Chronic**
  - **Urgent**
- **Scheduling staff member you will alert** - Name of the scheduling staff member.
- **Additional comments** – Field to enter additional comments.

#### 4.6.2.6.1. Community Care Consult Comment Clinical Triage Workflow

1. From the **Action** menu in CPRS, select **Consult Tracking...**, and then select **Add Comment**. The **Add Comment to Consult** dialog box opens.

**Figure 28: Add Comment to Consult Dialog Box**

**Add Comment to Consult**

Comments

An alert will automatically be sent to notification recipients for this service.

☐ Send additional alerts

Open Consult Toolbox

OK Cancel

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2. Click **Open Consult Toolbox**. The **CC Consult Comment** dashboard opens.
3. From the workflow menu, select **Clinical Triage** . The **CC Consult Comment Clinical Triage Dashboard Screen** displays.

**Figure 29: CC Consult Comment Clinical Triage**

Consult Toolbox

**Consult Toolbox**

What's New Help

Veteran Name: DSTSEVEN, CHYSHRSEVEN  
Residential Address: 287 West St, Rocky Hill, CT 06067 (41.65342, -72.65031)  
Consult to Service/Specialty: COMMUNITY CARE-CARDIOLOGY  
Urgency: Routine  
CID: 08/03/2021  
Seen As: Inpatient  
Community Care Eligibility: BMI Need for an attendant

**CC CONSULT COMMENT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening
- Clinical Triage**
- DoD Consult
- Appointment Tracking
- Request for Service (RFS)
- Consult Completion
- View Consult History
- User Settings

**Clinical Triage**

Admin Screening: Complex/Chronic  
CAN Score: Over 90

Prior Clinical Triage: Complex/Chronic  
Comorbidities: No Psychosocial: No ADL Support: Yes

☐ Update prior Clinical Triage Information

Additional Comments

**SAVE CHANGES**

Close Consult Toolbox

4. To update the prior information, select the **Update prior Clinical Triage information** check box. The CC Consult Comment Clinical Triage Dashboard Screen options display.

**Figure 30: CC Consult Comment Clinical Triage Dashboard Screen Options**

Consult Toolbox

**Consult Toolbox**

What's New Help

Veteran Name: DSTSEVEN, CHYSHRSEVEN  
Residential Address: 287 West St, Rocky Hill, CT 06067 (41.65342, -72.65031)  
Consult to Service/Specialty: COMMUNITY CARE-CARDIOLOGY  
Urgency: Routine  
CID: 08/03/2021  
Seen As: Inpatient  
Community Care Eligibility: BMI Need for an attendant

**CC CONSULT COMMENT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening
- Clinical Triage**
- DoD Consult
- Appointment Tracking
- Request for Service (RFS)
- Consult Completion
- View Consult History
- User Settings

**Clinical Triage**

Admin Screening: Complex/Chronic  
CAN Score: Over 90

Prior Clinical Triage: Complex/Chronic  
Comorbidities: No Psychosocial: No ADL Support: Yes

☒ Update prior Clinical Triage Information

**Veteran Comorbidities (required)**  
Based on your review of Veteran information and clinical judgement, will the Veteran require additional care coordination/support during this episode due to two or more comorbidities?  
No

**Psychosocial Factors (required)**  
Based on your review of Veteran information and clinical judgment, will the Veteran require additional care coordination/support during this episode due to any psychosocial factors? (e.g. Dementia, Depression, Homelessness,

**Clinical Care Coordination Level**  
Complex/Chronic

☒ Manual Adjustment of Clinical Care Coordination Level (required)  
Based on review of Veteran information and clinical judgment, the level of care coordination should be manually adjusted to:  
Basic  
Moderate  
Complex/Chronic  
Urgent

Scheduling staff member you will alert  
Default

Additional Comments

**SAVE CHANGES**

Close Consult Toolbox

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5. From the **Veteran Comorbidities** drop-down menu, select **Yes** or **No** if based on your review of Veteran information and clinical judgement if the Veteran will require additional care coordination/support during this episode of care due to two or more comorbidities.
6. From the **Psychosocial Factors** drop-down menu, select **Yes** or **No** if based on your review of the Veteran information and clinical judgement, if the Veteran will require additional care coordination/support during this episode of care due to any psychosocial factors (e.g. Dementia, Depression, Homelessness, Lack of Caregiver Support).
7. From the **Activities of Daily Life, or ADL support** drop-down menu, select **Yes** or **No** if based on your review of Veteran information and clinical judgement, if the Veteran will require ADL support.
8. CTB will calculate a level of care coordination based on the answers in the administrative screening and clinical triage sections.
9. In the **Additional Comments** section, enter any comments pertaining to the consult.
10. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
11. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

#### 4.6.2.7. Community Care Consult Comment DoD Consult Workflow

For additional information please refer to the CTB Help Files.

#### 4.6.2.8. Community Care Consult Comment Appointment Tracking

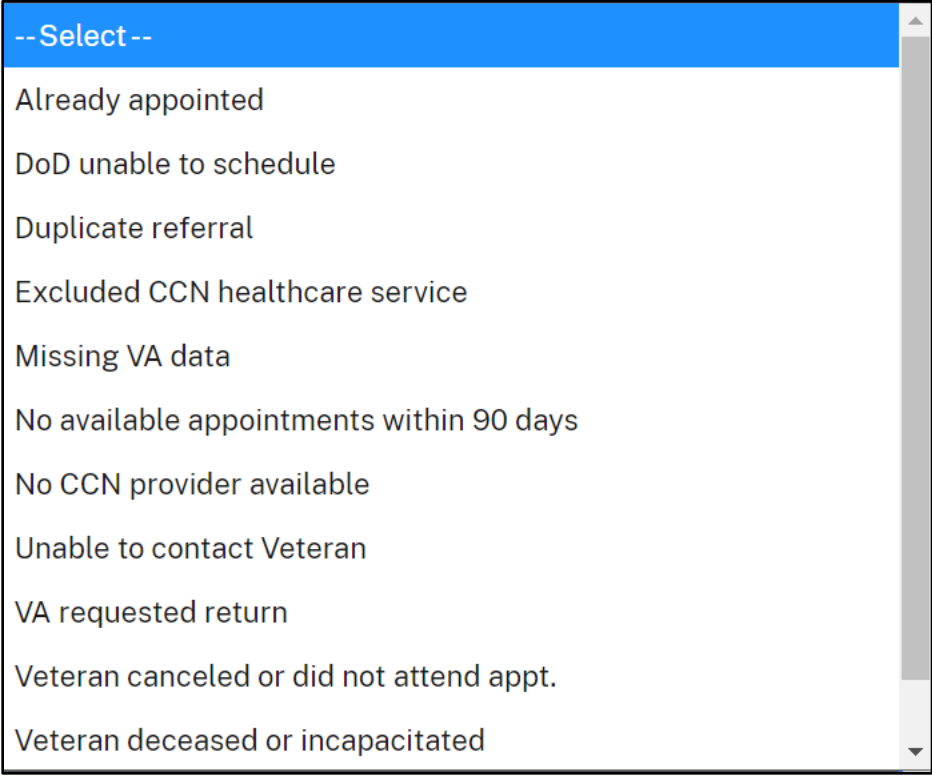
**Figure 31: CC Consult Comment Appointment Tracking Dashboard Screen**

The screenshot displays the 'Consult Toolbox' interface. At the top, there's a header with the 'Consult Toolbox' logo and navigation links like 'What's New' and 'Help'. Below the header, a section displays patient information: Veteran Name (DSTSEVEN, CHYSHRSEVEN), Residential Address (287 West St, Rocky Hill, CT 06067), Consult to Service/Specialty (COMMUNITY CARE-CARDIOLOGY), Urgency (Routine), CID (08/03/2021), Seen As (Inpatient), and Community Care Eligibility (BMI Need for an attendant). The main content area is titled 'Appointment Tracking' and includes a sidebar with navigation options like 'Consult Review', 'CC Eligibility (DST)', 'Contact Attempts', 'Patient Preferences', 'Admin Screening', 'Clinical Triage', 'DoD Consult', 'Appointment Tracking' (selected), 'Request for Service (RFS)', 'Consult Completion', 'View Consult History', and 'User Settings'. The 'Appointment Tracking' section contains a text box for 'Copy provider info from CPL and paste into text below', a link to 'Open Community Care Provider Locator', a section for 'Actual/Approved Provider Information', a section for 'Appointment tracking details' with checkboxes for 'Provider requires records to review prior to scheduling', 'Documents uploaded to HSRM', 'Records faxed/sent to community care provider', and 'Follow-up call made to provider/vendor to check on status', a dropdown for 'Veteran informed of scheduled appointment via', and a 'Responsible for Scheduling' dropdown. At the bottom right, there are 'SAVE CHANGES' and 'Close Consult Toolbox' buttons.

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- **Actual/Approved Provider Information** — Select the name of the provider the Veteran has an appointment with by selecting the **Lookup a Provider** button. The button works the same as the one on the MSA Pt Contacts tab. It may be different from the one the Veteran preferred if the provider was unable to see the Veteran or was not participating as a VA community provider.
- **Appointment tracking details**
  - **Provider requires records to review prior to scheduling** — records a situation where the potential Community Care provider requires records be reviewed prior to accepting the referral.
  - **Documents uploaded to HSRM** — Records when documentation for a Community Care referral has been uploaded to HSRM.
  - **Records faxed/sent to community care provider**
  - **Follow up call made to provider/vendor to check on status**—documents a follow-up call to vendor to check on referral status (i.e., records review was required).
- **Veteran informed of scheduled appointment via** - method of notification for the scheduled appointment. Select an option from the drop-down menu.
  - **Email**
  - **Mail**
  - **MyHealtheVet**
  - **Phone**
  - **Phone and mail**
  - **Text**
  - **Other (explanation required)**
- **Responsible for Scheduling**
  - **VA Facility CC Office**
  - **Veteran self-schedules**
  - **Community provider schedules**
  - **Community care contractor schedules**
- **Reason Referral could not be processed**

**Figure 32: Reason Referral could not be processed Menu Options**



--Select--

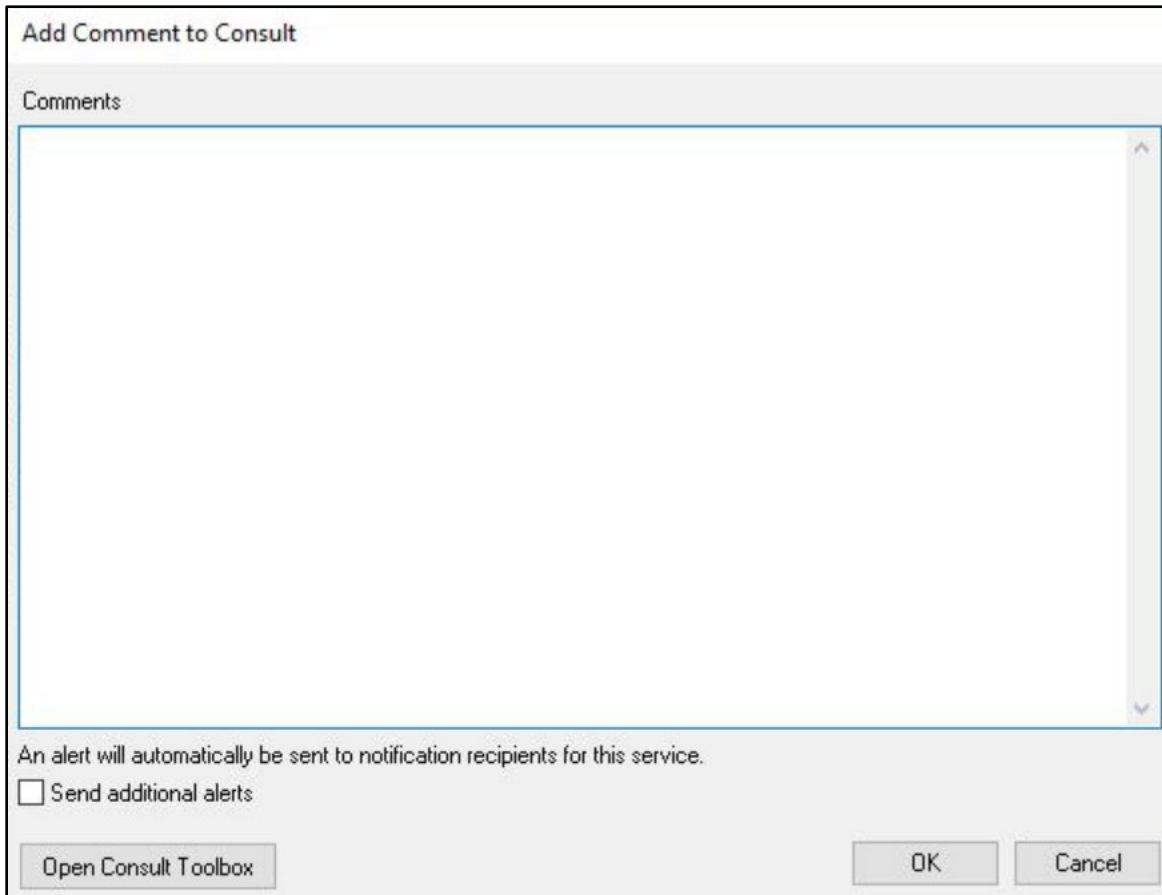
- Already appointed
- DoD unable to schedule
- Duplicate referral
- Excluded CCN healthcare service
- Missing VA data
- No available appointments within 90 days
- No CCN provider available
- Unable to contact Veteran
- VA requested return
- Veteran canceled or did not attend appt.
- Veteran deceased or incapacitated

- **Additional Comments** – Field to enter additional comments.

#### 4.6.2.8.1. Community Care Consult Comment Appointment Tracking Workflow

1. From the **Action** menu in CPRS, select **Consult Tracking...**, and then select **Add Comment**. The **Add Comment to Consult** dialog box opens.

**Figure 33: Add Comment to Consult Dialog Box**



The screenshot shows a dialog box titled "Add Comment to Consult". It features a large text area for entering comments. Below the text area, there is a checkbox labeled "Send additional alerts" with the text "An alert will automatically be sent to notification recipients for this service." above it. At the bottom of the dialog, there are three buttons: "Open Consult Toolbox", "OK", and "Cancel".

2. Click **Open Consult Toolbox**. The **CC Consult Comment** dashboard opens.
3. From the workflow menu, select **Appointment Tracking**. The **CC Consult Comment Clinical Appointment Tracking Screen** displays.

Figure 34: CC Consult Comment Appointment Tracking Dashboard Screen

4. In the **Actual/Approved Provider Information** field, enter the name of the actual provider with whom the Veteran has an appointment should be selected using the **Open Community Care Provider Locator** link.
5. From the **Appointment tracking details** section, select the tracking detail options for the appointment.
6. From the **Veteran informed of scheduled appointment via** drop-down menu, select the method of notification for the scheduled appointment. If **Other** is selected, you will be required to enter an explanation in the field.
7. From the **Responsible for Scheduling** drop-down menu, select who is responsible for scheduling.
8. From the **Reason Referral could not be processed** drop-down menu, select the reason the referral could not be processed.
9. In the **Additional Comments** section, enter any comments pertaining to the consult.
10. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
11. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

#### 4.6.2.9. Community Care Consult Comment Request for Service (RFS)

Figure 35: CC Consult Comment Request for Service (RFS) Dashboard Screen

The screenshot shows the 'Consult Toolbox' dashboard for a 'Request for Service' (RFS). The top header includes the 'Consult Toolbox' logo and navigation links for 'What's New' and 'Help'. Below the header, a patient information summary is displayed, including the Veteran's name (DSTSEVEN, CHYSHRSEVEN), residential address (287 West St, Rocky Hill, CT 06067), consult to service/specialty (COMMUNITY CARE-CARDIOLOGY), urgency (Routine), CID (08/03/2021), and seen as (Inpatient). A 'Community Care Eligibility' status is shown as 'BMI Need for an attendant' with a green checkmark.

The main content area is divided into two columns. The left column contains a sidebar menu with options: 'CC CONSULT COMMENT', 'Consult Review', 'CC Eligibility (DST)', 'Contact Attempts', 'Patient Preferences', 'Admin Screening', 'Clinical Triage', 'DoD Consult', 'Appointment Tracking', 'Request for Service (RFS)' (highlighted), 'Consult Completion', 'View Consult History', and 'User Settings'. The right column contains the 'Request for Service' form. This form includes fields for 'Date Received (required)' and 'Sent for scanning (required)', both with date pickers. Below these is a dropdown for 'RFS Urgency' and a text area for 'RFS - Details of what was requested'. There is a checkbox for 'Requires Delegation of Authority clinical review' and a dropdown for 'Delegation of Authority - Clinical Review Method'. On the far right, there is a section for 'RFS Decision' with a dropdown menu, a checkbox for 'Notification of RFS Decision' (Requesting provider notified of RFS decision), and a text area for 'Additional Comments'. At the bottom right of the form, there is a 'SAVE CHANGES' button and a 'Close Consult Toolbox' link.

- **Date Received (required)**
- **Sent for scanning (required)**
- **RFS Urgency** —Urgency for the request for service. Select an option from the drop-down menu.
  - **Routine**
  - **Within 48 hours**
  - **Within 1 week**
  - **Within 1 month**
- **RFS - Details of what was requested** - comment related to the request for service.
- **Requires Delegation of Authority clinical review** - Select if clinical review is required.
  - **Sent for DOA review (required)** – Enter or select the date.
- **Delegation of Authority – Clinical Review Method** –
  - **MCG Guidelines**
  - **InterQual Criteria**
  - **Chief of Staff approved Protocol**
- **Clinical Evaluation of RFS** –
  - **Request is Clinically Appropriate**
  - **Request is not Clinically Appropriate**
- **RFS Decision**
  - **RFS already covered under existing referral**

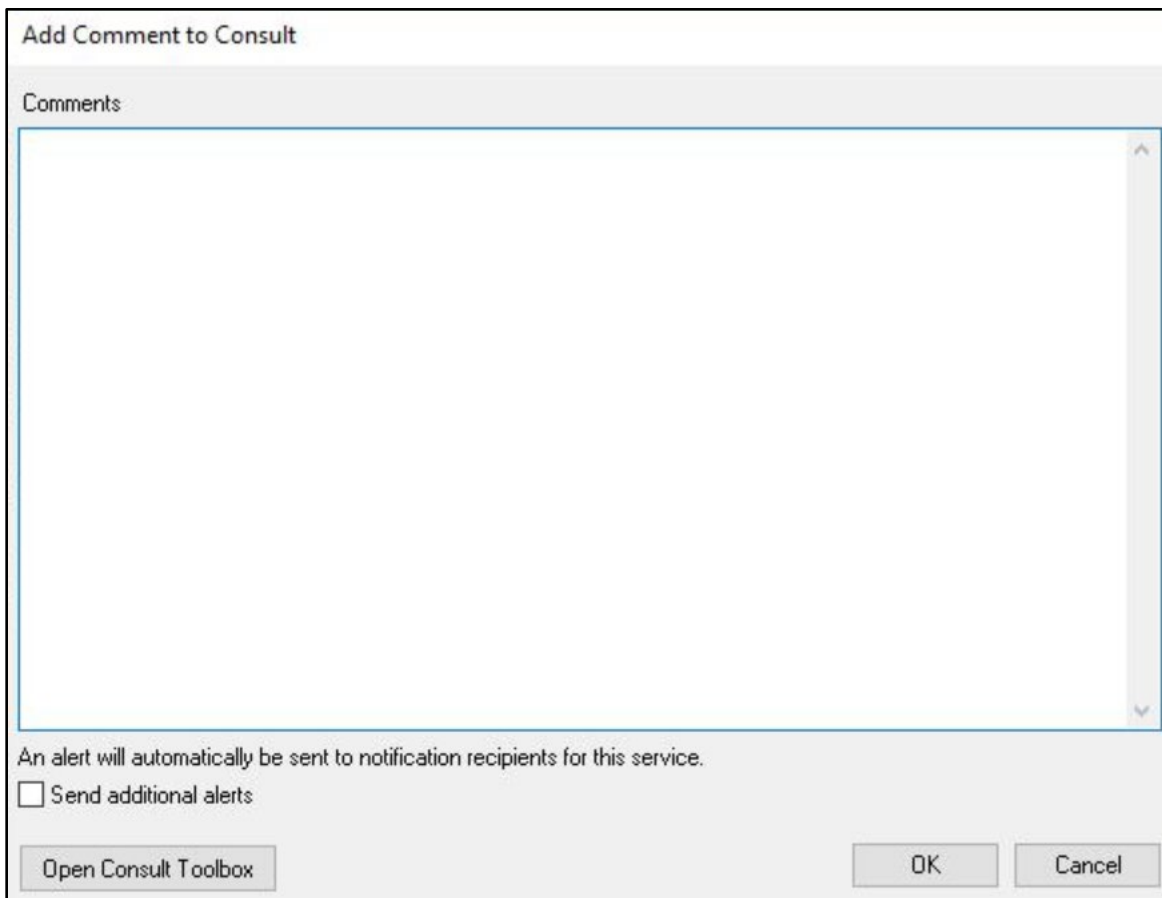
Authorized Use Only

- **RFS approved**
  - **Action Taken**
    - **New community care consult/order created**
    - **New in-house VA consult/order created**
    - **Request sent to primary care provider for action**
    - **Request sent to specialty care provider for action**
    - **Request sent to community care staff with DOA for action**
- **RFS disapproved**
  - **Reason for disapproving request (required)**
    - **Not a covered benefit**
    - **Missing signature**
    - **Missing or insufficient documentation (explanation required)**
      - **Explanation**
    - **Request is not clinically appropriate (explanation required)**
      - **Explanation**
    - **Other (explanation required)**
      - **Explanation**
- **Notification of RFS Decision**
  - **Requesting provider notified of RFS decision**
    - **Notification date (required)** – Enter or select the date.
- **Additional Comments** – Field to enter additional comments.

#### **4.6.2.9.1. Community Care Consult Comment Request for Service (RFS) Workflow**

1. From the **Action** menu in CPRS, select **Consult Tracking...**, and then select **Add Comment**. The **Add Comment to Consult** dialog box opens.

**Figure 36: Add Comment to Consult Dialog Box**



The dialog box is titled "Add Comment to Consult". It features a large text area labeled "Comments" with a vertical scrollbar on the right. Below the text area, there is a message: "An alert will automatically be sent to notification recipients for this service." followed by a checkbox labeled "Send additional alerts". At the bottom left is a button labeled "Open Consult Toolbox". At the bottom right are two buttons labeled "OK" and "Cancel".

2. Click **Open Consult Toolbox**. The **CC Consult Comment** dashboard opens.
3. From the workflow menu, select **Request for Service (RFS)**. The **CC Consult Comment Request for Service (RFS) Dashboard Screen** displays.



**Figure 37: CC Consult Comment Request for Service (RFS) Dashboard Screen**

4. In the **Date Received** field, enter/select the date the request was received.
5. In the **Sent for scanning** field, enter/select the date the request was sent for scanning.
6. From the **RFS Urgency** drop-down menu, select the urgency for the request for service.
7. In the **RFS - Details of what was requested** field, enter a comment related to the request for service.
8. Select the **Requires Delegation of Authority clinical review** check box if clinical review is required.
9. From the **Delegation of Authority – Clinical Review Method** drop-down menu, select the option.
10. From the **Clinical Evaluation of RFS** drop-down menu, select the option.
11. From the **RFS Decision** drop-down menu, select the request for service decision.
12. From the **Notification of RFS Decision** section, select the **Requesting provider notified of RFS decision** check box if the requesting provided has been notified of the RFS decision.
13. In the **Additional Comments** section, enter any comments pertaining to the consult.
14. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
15. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

#### 4.6.2.10. Community Care Consult Comment Consult Completion

Figure 38: CC Consult Comment Consult Completion Dashboard Screen

Consult Toolbox

**Consult Toolbox** [What's New](#) [Help](#)

Veteran Name  
DSTSEVEN, CHYSHRSEVEN

Residential Address  
287 West St  
Rocky Hill, CT 06067  
(41.65342, -72.65031)

Consult to Service/Specialty  
COMMUNITY CARE-CARDIOLOGY

Urgency  
Routine

CID  
08/03/2021

Seen As  
Inpatient

Community Care Eligibility  
BMI Need for an attendant

**CC CONSULT COMMENT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening
- Clinical Triage
- DoD Consult
- Appointment Tracking
- Request for Service (RFS)
- Consult Completion**
- View Consult History
- User Settings

**CC Consult Completion Page**

☒ Attempted to get records from community provider

- ☐ First attempt to get records
- ☐ Second attempt to get records
- ☐ Third attempt to get records
- ☐ No records after three attempts
- ☐ Records received

Community Care appointment occurred (waiting for records)

-- Select --

☐ Refer to Clinical Care Coordinator

**Additional Comments**

**SAVE CHANGES**

Close Consult Toolbox

- **Attempted to get records from community provider**
  - **First attempt to get records** - documents first request for records for Community Care.
  - **Second attempt to get records** - documents second request for records for Community Care.
  - **Third attempt to get records** - documents third request for records for Community Care.
  - **No records after three attempts**
  - **Records Received** - documents receipt of records pertinent to this consult. This is particularly useful in the case that those records cannot be uploaded to VistA Imaging immediately.
    - **Records received via (required)**
      - **Paper Fax**
      - **eFax**
      - **VHIE**
      - **Secure Email**
      - **US Mail**
      - **EDI Claim Attachment**
      - **HSRM**
      - **Direct**
      - **Other**

Authorized Use Only

- **Date received (required)** - date received. Field that allows you to input or click the calendar icon to select a date. *This is a required field.*
- **Sent for Scanning (required)** - date sent for scanning. Field that allows you to input or click the calendar icon to select a date. *This is a required field.*
- **Community Care appointment occurred (waiting for records)**
  - **Per Veteran, awaiting records/confirmation**
  - **Per Provider, awaiting records**
  - **Other (explanation required)**
    - **Explanation (required)**
- **Refer to Clinical Care Coordinator** - clinical review determines next steps after care when there are no records.
- **Additional Comments** – Field to enter additional comments.

#### 4.6.2.10.1. Community Care Consult Comment Consult Completion Workflow

1. From the **Action** menu in CPRS, select **Consult Tracking...**, and then select **Add Comment**. The **Add Comment to Consult** dialog box opens.

**Figure 39: Add Comment to Consult Dialog Box**

The screenshot shows a standard Windows-style dialog box titled "Add Comment to Consult". The main area is a large text box for entering comments. Below the text box, there is a checkbox labeled "Send additional alerts" and a line of text stating "An alert will automatically be sent to notification recipients for this service." At the bottom of the dialog, there are three buttons: "Open Consult Toolbox" on the left, and "OK" and "Cancel" on the right.

2. Click **Open Consult Toolbox**. The **CC Consult Comment** dashboard opens.

- From the workflow menu, select **Consult Completion** . The **CC Consult Comment Consult Completion Dashboard Screen** displays.

**Figure 40: CC Consult Comment Consult Completion Dashboard Screen**

**Consult Toolbox** What's New Help

<b>Veteran Name</b> PATIENT, TEST	<b>Residential Address</b> 611 1ST ST W Morton, MN 56270 (38.8943, -77.438683)	<b>Consult to Service/Specialty</b> Audiology	<b>Community Care Eligibility</b> ? Not Established
<b>Date of Birth</b> Jan 1, 1900 (121)		<b>Urgency</b> Routine	<b>CID</b> 07/20/2021
		<b>Seen As</b> Outpatient	

**CC CONSULT COMMENT**

- Consult Review
- CC Eligibility (DST)
- Contact Attempts
- Patient Preferences
- Admin Screening
- Clinical Triage
- DoD Consult
- Appointment Tracking
- Request for Service (RFS)
- Consult Completion**
- View Consult History
- User Settings

**CC Consult Completion Page**

- ☒ **Attempted to get records from community provider**
  - ☐ First attempt to get records
  - ☐ Second attempt to get records
  - ☐ Third attempt to get records
  - ☐ No records after three attempts
  - ☐ Records received
- Community Care appointment occurred (waiting for records)**

-- Select --
- ☐ **Refer to Clinical Care Coordinator**

**Additional Comments**

**SAVE CHANGES**

- From the **Consult Completion** section, select if the records were received or the number of attempts to get the records. If the records were received, you will need to select how they were received, when they were received, and date they were sent for scanning.
- From the **Community Care appointment occurred (waiting for records)** drop-down menu, select option regarding awaiting records. If Other is selected, you are required to enter an explanation in the field provided.
- Select the **Refer to Clinical Care Coordinator** check box if the clinical review determines next steps after care when there are no records.
- In the **Additional Comments** section, enter any comments pertaining to the consult.
- Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
- Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

## 4.7. Update Significant Findings

Use this feature to flag significant findings for the ordering provider (e.g., test results are available). This box is used with the significant findings CPRS comment to alert the ordering provider of results received especially in the case where a follow-up action is needed on the part of the VA provider.

### 4.7.1. Significant Findings

Figure 41: Significant Findings Dashboard Screen

**Consult Toolbox**

**What's New** **Help**

<b>Veteran Name</b> DSTSEVEN, CHYSHRSEVEN	<b>Residential Address</b> 287 West St Rocky Hill, CT 06067 (41.65342, -72.65031)	<b>Consult to Service/Specialty</b> COMMUNITY CARE-CARDIOLOGY	<b>Community Care Eligibility</b> BMI Need for an attendant
<b>Date of Birth</b> Mar 29, 1955 (66)	<b>Urgency</b> Routine	<b>CID</b> 08/03/2021	<b>Seen As</b> Inpatient

**SIGNIFICANT FINDINGS**

- Significant Findings**
- Request for Service (RFS)
- View Consult History
- User Settings

**Significant Findings Update**

**Type of Records Received**

-- Select --

**Follow-up Actions required by referring provider (required)**

**Diagnosis associated with significant finding**

Is there an associated Request for Service (RFS)

☐ Yes ☐ No

**Episode of Care Details**

**Date of Appointment/Visit**

Date

**Provider Name**

**Site/Facility Name**

**Provisional Diagnosis**  
Exposure to X-Rays, Sequela(ICD-10-CM W88.0XXS)

**Specialty Requested**

**Service Requested**

**Surgery/procedure complete?**

☐ N/A ☐ Yes ☐ No

**SAVE CHANGES**

Close Consult Toolbox

- **Significant Findings Update**
  - **Type of Records Received**
    - **Paper Fax**
    - **eFax**
    - **VHIE**
    - **Secure Email**
    - **US Mail**
    - **EDI Claim Attachment**
    - **HSRM**
    - **Direct – Directly from Veteran**
    - **Other (explanation required)**
  - **Follow up Actions required by referring provider (required)**
  - **Diagnosis associated with significant finding**
  - **Is there an associated Request for Service (RFS)**
    - **Yes**

Authorized Use Only

- No
  - Warm hand-off discussed with
- Episode of Care Details
  - Date of Appointment/Visit
  - Provider Name
  - Site/Facility Name
  - Provisional Diagnosis -
  - Specialty Requested -
  - Service Requested -
  - Surgery/procedure complete?
    - N/A
    - Yes
    - No
  - Additional Comments – Field to enter additional comments.

#### 4.7.1.1. Significant Findings Workflow

To update significant findings for the ordering provider, follow the steps listed below:

1. From the **Action** menu, select **Consult Tracking...**, and then select **Significant Findings**. The **Update Significant Findings** dialog box displays.

**Figure 42: Update Significant Findings Dialog Box**

Update Significant Findings

Significant Findings - Current status: Not yet entered

☐ Yes ☐ No ☒ Unknown

Comments

An alert will automatically be sent to notification recipients for this service.

☐ Send additional alerts

Open Consult Toolbox OK Cancel

2. From the **Update Significant Findings** dialog box, click **Open Consult Toolbox**. The **CTB Dashboard Screen** displays.
3. From the **CTB Dashboard Screen**, under the workflow menu click **Significant Findings**. The **Significant Findings Dashboard Screen** displays.

**Figure 43: Significant Findings Dashboard Screen**

**Consult Toolbox** What's New Help

**Patient Information:**  
 Veteran Name: PATIENT, TEST  
 Date of Birth: Jan 1, 1900 (121)  
 Residential Address: 611 1ST ST W, Morton, MN 56270 (38.8943, -77.438683)  
 Consult to Service/Specialty: Audiology  
 Urgency: Routine CID: 07/20/2021  
 Seen As: Outpatient  
 Community Care Eligibility: Not Established

**Significant Findings**  
 Significant Findings Update  
 Type of Records Received: -- Select --  
 Follow-up Actions required by referring provider (required):  
 [Text Field]  
 Diagnosis associated with significant finding:  
 [Text Field]  
 Is there an associated Request for Service (RFS):  
☐ Yes ☐ No  
 Warm hand-off discussed with:  
 [Text Field]

**Episode of Care Details**  
 Date of Appointment/Visit:  
 [Date Picker]  
 Provider Name:  
 [Text Field]  
 Site/Facility Name:  
 [Text Field]  
 Provisional Diagnosis:  
 Specialty Requested:  
 Service Requested:  
 Surgery/procedure complete?:  
☐ N/A ☐ Yes ☐ No  
 Additional Comments:  
 [Text Area]  
 SAVE CHANGES

4. From the **Type of Records Received** drop-down menu, select the record type.
5. In the **Follow-up Actions required by referring provider:** text field, enter the required actions. *This is a required field.*
6. In the **Diagnosis associated with significant finding** field, enter the name of the diagnosis.
7. Select **Yes** or **No** if there is an associated Request for Service.
8. Enter the name of the individual the warm handoff was discussed with in the **Warm Handoff discussed with** field.
9. In the **Episode of Care Details** section, enter/select a date in the **Date of Appointment/Visit** field.
10. In the **Provider Name** field, enter the name of the provider.
11. In the **Site/Facility Name** field, enter the name of the site/facility.
12. Select **Yes** or **No** if the surgery/procedure has been completed. If it is unknown, select **N/A**.
13. In the **Additional Comments** field, enter any comments pertaining to the significant findings.
14. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.

15. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

## 4.7.2. Request for Service (RFS)

Figure 44: Request for Service (RFS) Dashboard Screen

The screenshot shows the 'Consult Toolbox' interface. At the top, there's a header with the VA logo and 'Consult Toolbox' text. Below this, a patient information bar includes fields for Veteran Name (DSTSEVEN, CHYSHRSEVEN), Residential Address (287 West St, Rocky Hill, CT 06067), Consult to Service/Specialty (COMMUNITY CARE-CARDIOLOGY), Urgency (Routine), CID (08/03/2021), Seen As (Inpatient), and Community Care Eligibility (BMI Need for an attendant). A sidebar on the left contains 'SIGNIFICANT FINDINGS', 'Request for Service (RFS)', 'View Consult History', and 'User Settings'. The main content area is titled 'Request for Service' and includes fields for 'Date Received (required)', 'Sent for scanning (required)', 'RFS Urgency' (a dropdown menu), 'RFS - Details of what was requested' (a text area), a checkbox for 'Requires Delegation of Authority clinical review', and a dropdown for 'Delegation of Authority - Clinical Review Method'. On the right, there's a section for 'RFS Decision' with a dropdown, a checkbox for 'Notification of RFS Decision', and a text area for 'Additional Comments'. At the bottom right, there are 'SAVE CHANGES' and 'Close Consult Toolbox' buttons.

- **Date Received (required)**
- **Sent for scanning (required)**
- **RFS Urgency** —Urgency for the request for service. Select an option from the drop-down menu.
  - **Routine**
  - **Within 48 hours**
  - **Within 1 week**
  - **Within 1 month**
- **RFS - Details of what was requested** - comment related to the request for service.
- **Requires Delegation of Authority clinical review** - This allows staff to select if clinical review is required.
  - **Sent for DOA review** – This is a required date field.
- **Delegation of Authority – Clinical Review Method** –
  - **MCG Guidelines**
  - **InterQual Criteria**
  - **Chief of Staff approved Protocol**
- **Clinical Evaluation of RFS** –
  - **Request is Clinically Appropriate**

Authorized Use Only



- Request is NOT Clinically Appropriate
- **RFS Decision**
  - RFS already covered under existing referral
  - RFS approved
    - **Action Taken (required)**
      - New community care consult/order created
      - New in-house VA consult/order created
      - Request sent to primary care provider for action
      - Request sent to specialty care provider for action
      - Request sent to community care staff with DOA for action
  - RFS disapproved
    - **Reason for disapproving request (required)**
      - Not a covered benefit
      - Missing signature
      - Missing or insufficient documentation (explanation required)
        - Explanation (required)
      - Request is not clinically appropriate (explanation required)
        - Explanation (required)
      - Other (explanation required)
        - Explanation (required)
- **Notification of RFS Decision**
  - **Requesting provider notified of RFS decision**
    - **Notification date** – This is a required date field.
- **Additional Comments** – Field to enter additional comments.

#### 4.7.2.1. Request for Service (RFS) Workflow

To update significant findings for the ordering provider, follow the steps listed below:

1. From the **Action** menu, select **Consult Tracking...**, and then select **Significant Findings**. The **Update Significant Findings** dialog box displays.

**Figure 45: Update Significant Findings Dialog Box**

Update Significant Findings

Significant Findings - Current status: Not yet entered

☐ Yes ☐ No ☒ Unknown

Comments

An alert will automatically be sent to notification recipients for this service.

☐ Send additional alerts

Open Consult Toolbox OK Cancel

2. From the **Update Significant Findings** dialog box, click **Open Consult Toolbox**. The **CTB Dashboard Screen** displays.
3. From the **CTB Dashboard Screen**, under the workflow menu click **Request for Service (RFS)**. The **Request for Service (RFS) Dashboard Screen** displays.

**Figure 46: Request for Service (RFS) Dashboard Screen**

4. In the **Date Received** field, enter or select the date the RFS was received. *This is a required field.*
5. In the **Sent for scanning** field, enter or select the date the RFS was sent for scanning. *This is a required field.*
6. From the **RFS Urgency** drop-down menu, select the type of urgency for the RFS.
7. In the **RFS - Details of what was requested** field, enter a comment related to the RFS.
8. Select the **Requires Delegation of Authority clinical review** check box if clinical review is required.
9. From the **Delegation of Authority – Clinical Review Method** drop-down menu, select the type of clinical review method for the RFS.
10. From the **Clinical Evaluation of RFS** drop-down menu, select if the request is clinically appropriate or not.
11. From the **RFS Decision** drop-down menu, select the RFS decision for the RFS.
12. Select the **Requesting provider notified of RFS decision** check box if the provider was notified of the RFS decision.
13. In the **Additional Comments** section, enter any comments pertaining to the consult.
14. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
15. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

## 4.8. Discontinue Consult



**CAUTION:** Per national guidance, the use of *Discontinue* is no longer authorized in any circumstance. Close the browser window to return to CPRS and select *Cancel (Deny)* and re-open *Consult Toolbox*.

Figure 47: Discontinue Consult Dashboard Screen

The screenshot shows the 'Consult Toolbox' interface. At the top, there is a header bar with the application logo, the title 'Consult Toolbox', and links for 'What's New' and 'Help'. Below the header, a patient information section displays details for 'PATIENT, TEST', including their date of birth (Jan 1, 1900), residential address (611 1ST ST W, Morton, MN 56270), consult service (Audiology), urgency (Routine), CID (07/20/2021), and seen as (Outpatient). The 'Community Care Eligibility' status is 'Not Established'. On the left, a sidebar menu includes 'DISCONTINUE CONSULT', 'Discontinue Consult' (selected), and 'User Settings'. The main content area, titled 'Discontinue Consult', features a prominent yellow warning box with an exclamation mark icon. The text in the box reads: 'STOP - THERE HAS BEEN A POLICY UPDATE: Per national guidance, the use of Discontinue is no longer authorized in any circumstance. Close the browser window to return to CPRS and select Cancel (Deny) and re-open Consult Toolbox.'

## 4.9. Cancel (Deny) Consult

When canceling/denying a consult, a reason that meets central office criteria must be entered to document the reason for cancellation/denial. Right clicking the text area will bring up the list of approved reasons. Additional comments may be made as well.

### 4.9.1. VA Cancel Consult

Figure 48: Cancel VA Consult Dashboard Screen

**Consult Toolbox** What's New Help

**Veteran Name**  
PATIENT, TEST

**Residential Address**  
611 1ST ST W  
Morton, MN 56270  
(38.8943, -77.438683)

**Consult to Service/Specialty**  
Community Care-Admin VCCPE

**Urgency**  
Routine

**CID**  
07/19/2021

**Seen As**  
Outpatient

**Community Care Eligibility**  
Not Established

**CANCEL VA CONSULT**

**Cancel Consult**

View Consult History

Go to CC Workflow

User Settings

**VA Cancel Page**

**Reason for canceling VA consult (required)**

- ☐ Appointment not wanted by Veteran
- ☐ Care is no longer needed
- ☐ Does not meet criteria (explanation required)
- ☐ Duplicate request
- ☐ Eligibility requirements not met
- ☐ Entered/Requested in error
- ☐ Established pt, follow up appointment scheduled
- ☐ Failed mandated scheduling effort
- ☐ Incomplete work-up (explanation required)
- ☐ Incorrect service (explanation required)
- ☐ Recommend alternative to consult (explanation required)
- ☐ Veteran deceased or incapacitated
- ☐ Other (explanation required)

**Additional Comments**

**SAVE CHANGES**

- **Reason for canceling VA consult (required)**
  - **Appointment not wanted by Veteran**
  - **Care is no longer needed**
  - **Does not meet criteria (explanation required)**
    - **Explanation (required)** - Field to enter explanation.
  - **Duplicate Request**
  - **Eligibility requirements not met** - This is to be used where VA benefits or the Veteran's clinical situation do not allow them to receive this service from the VA. An example would be routine dental care for a Veteran not eligible for dental care.
  - **Entered/Requested in error** –
  - **Established pt., follow up appointment scheduled** – this indicates that the established Veteran has been scheduled with a follow up appointment, and the consult is no longer needed.
  - **Failed mandated scheduling** – use when Veteran has missed two or more appointments or fails to respond to mandated minimum number of calls, letter(s), and adequate time to respond.

Authorized Use Only

- **Incomplete work-up (explanation required)**
  - **Explanation (required)** - Field to enter explanation.
- **Incorrect service (explanation required)**
  - **Explanation (required)** - Field to enter explanation.
- **Recommend alternative to consult (explanation required)**
  - **Explanation (required)** - Field to enter explanation.
- **Veteran deceased or incapacitated**
- **Other (explanation required)**
  - **Explanation (required)** - Field to enter explanation.
- **Additional Comments** – Field to enter additional comments.

#### 4.9.1.1. VA Cancel Consult Workflow

To cancel/deny a VA consult, follow the steps listed below:

1. From the **Action** menu, select **Consult Tracking...**, and then select **Cancel (Deny)**. The **Cancel (Deny) Consult** dialog box displays.

**Figure 49: Cancel (Deny) Consult Dialog Box**

The screenshot shows a dialog box titled "Cancel (Deny) Consult". It features a "Comments" section with a large text area. At the bottom, there are two input fields: "Date/time of this action" (set to "Now") and "Action by" (showing a user's name). Below these fields are three buttons: "Open Consult Toolbox", "OK", and "Cancel".

2. From the **Cancel (Deny)** dialog box, click **Open Consult Toolbox**. The CTB Dashboard Screen displays.

- From the **CTB Dashboard Screen**, under the workflow menu click **Cancel Consult**. The **Cancel VA Consult Dashboard Screen** displays.

**Figure 50: Cancel VA Consult Dashboard Screen**

**Consult Toolbox** What's New Help

<b>Veteran Name</b> PATIENT, TEST	<b>Residential Address</b> 611 1ST ST W Morton, MN 56270 (38.8943, -77.438683)	<b>Consult to Service/Specialty</b> Community Care-Admin VCCPE	<b>Community Care Eligibility</b> <b>Not Established</b>
<b>Date of Birth</b> Jan 1, 1900 (121)		<b>Urgency</b> Routine	<b>CID</b> 07/19/2021
		<b>Seen As</b> Outpatient	

**CANCEL VA CONSULT**  
**Cancel Consult**  
View Consult History  
Go to CC Workflow  
User Settings

**VA Cancel Page**  
**Reason for canceling VA consult (required)**  
☐ Appointment not wanted by Veteran  
☐ Care is no longer needed  
☐ Does not meet criteria (explanation required)  
☐ Duplicate request  
☐ Eligibility requirements not met  
☐ Entered/Requested in error  
☐ Established pt, follow up appointment scheduled  
☐ Failed mandated scheduling effort  
☐ Incomplete work-up (explanation required)  
☐ Incorrect service (explanation required)  
☐ Recommend alternative to consult (explanation required)  
☐ Veteran deceased or incapacitated  
☐ Other (explanation required)

**Additional Comments**

**SAVE CHANGES**

- From the **Reason for canceling VA consult (required)** section, select the reason why the consult is being canceled/denied.
- In the **Additional Comments** field enter any comments regarding canceling the VA consult.
- Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
- Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

## 4.9.2. Community Care Cancel Consult

Figure 51: Cancel CC Consult Dashboard Screen

Consult Toolbox

**Consult Toolbox** [What's New](#) [Help](#)

<b>Veteran Name</b> DSTSEVEN, CHYSHRSEVEN	<b>Residential Address</b> 287 West St Rocky Hill, CT 06067 (41.65342, -72.65031)	<b>Consult to Service/Specialty</b> COMMUNITY CARE-CARDIOLOGY	<b>Urgency</b> Routine	<b>CID</b> 08/03/2021	<b>Seen As</b> Inpatient	<b>Community Care Eligibility</b> BMI Need for an attendant
--	--	--	---------------------------	--------------------------	-----------------------------	--

**CANCEL CC CONSULT**

**Cancel Consult**

[View Consult History](#)

[User Settings](#)

**CC Cancel Page**

**Reason for canceling community care consult (required)**

- ☐ Care is no longer required per VA
- ☐ Care is no longer required per Veteran
- ☐ Care requested covered on existing CC referral
- ☐ Care was provided by OHI
- ☐ Care was provided by VA appointment
- ☐ Duplicate request
- ☐ Entered/requested in error
- ☐ Not administratively eligible for VA care
- ☐ Not eligible for community care
- ☐ Unable to contact Veteran after mandated effort
- ☐ Veteran deceased or incapacitated
- ☐ Other (explanation required)

**Additional Comments**

**SAVE CHANGES**

[Close Consult Toolbox](#)

- **Reason for canceling community care consult (required)**
  - **Care is no longer required per VA**
  - **Care is no longer required per Veteran**
  - **Care requested covered on existing CC referral**
  - **Care was provided by OHI**
  - **Care was provided by VA appointment**
  - **Duplicate Request**
  - **Entered/Requested in error –**
  - **Not administratively eligible for VA care**
  - **Not eligible for community care**
  - **Unable to contact Veteran after mandated effort**
  - **Veteran deceased or incapacitated**
  - **Other (explanation required)**
    - **Explanation (required)** - Field to enter explanation.
- **Additional Comments** – Field to enter additional comments.



#### 4.9.2.1. Community Care Cancel Consult Workflow

To cancel/deny a Community Care consult, follow the steps listed below:

8. From the **Action** menu, select **Consult Tracking...**, and then select **Cancel (Deny)**. The **Cancel (Deny) Consult** dialog box displays.

**Figure 52: Cancel (Deny) Consult Dialog Box**

Cancel (Deny) Consult

Comments

Date/time of this action: Now

Action by: [User Name]

Open Consult Toolbox OK Cancel

9. From the **Cancel (Deny)** dialog box, click **Open Consult Toolbox**. The CTB Dashboard Screen displays.
10. From the **CTB Dashboard Screen**, under the workflow menu click **Cancel Consult**. The **Cancel CC Consult Dashboard Screen** displays.

**Figure 53: Cancel CC Consult Dashboard Screen**

**Consult Toolbox** What's New Help

**Veteran Name**  
PATIENT, TEST

**Date of Birth**  
Jan 1, 1900 (121)

**Residential Address**  
611 1ST ST W  
Morton, MN 56270  
(38.8943, -77.438683)

**Consult to Service/Specialty**  
Audiology

**Urgency**  
Routine

**CID**  
07/20/2021

**Seen As**  
Outpatient

**Community Care Eligibility**  
Not Established

**CANCEL VA CONSULT**

**Cancel Consult**

[View Consult History](#)

[User Settings](#)

**VA Cancel Page**

**Reason for canceling VA consult (required)**

- ☐ Appointment not wanted by Veteran
- ☐ Care is no longer needed
- ☐ Does not meet criteria (explanation required)
- ☐ Duplicate request
- ☐ Eligibility requirements not met
- ☐ Entered/Requested in error
- ☐ Established pt, follow up appointment scheduled
- ☐ Failed mandated scheduling effort
- ☐ Incomplete work-up (explanation required)
- ☐ Incorrect service (explanation required)
- ☐ Recommend alternative to consult (explanation required)
- ☐ Veteran deceased or incapacitated
- ☐ Other (explanation required)

**Additional Comments**

**SAVE CHANGES**

11. From the **Reason for canceling community care consult (required)** section, select the reason why the consult is being canceled/denied.
12. In the **Additional Comments** field enter any comments regarding canceling the CC consult.
13. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
14. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

## 4.10. Administrative Complete

After one attempt to obtain records, a consult may be administratively closed. This will record that the consult was closed without records, which may be tracked.

Figure 54: Administratively Complete Dashboard Screen

**Consult Toolbox** What's New Help

**Veteran Name**  
PATIENT, TEST

**Residential Address**  
611 1ST ST W  
Morton, MN 56270  
(38.8943, -77.438683)

**Consult to Service/Specialty**  
Audiology

**Urgency**  
Routine

**CID**  
07/20/2021

**Seen As**  
Outpatient

**Community Care Eligibility**  
Not Established

**ADMIN COMPLETE**

**Administratively Complete**

**Administratively Complete Consult** (required)

☒ Administratively complete with records follow-up

Facility community care staff have received confirmation that the Veteran has attended the initial visit. One attempt has been made to obtain medical records without timely response from the community provider. This consult is being administratively completed. Two additional documented attempts must be made to obtain the medical records per the guidance in the Office of Community Care Field Guidebook.

☐ Administratively complete without records follow-up (low-risk consult)

Low Risk Consult - Facility community care staff have received confirmation that the Veteran has attended the initial visit. One attempt has been made to obtain medical records without timely response from the community provider. This consult is being administratively completed per the guidance in the Office of Community Care Field Guidebook.

**Additional Comments**

**SAVE CHANGES**

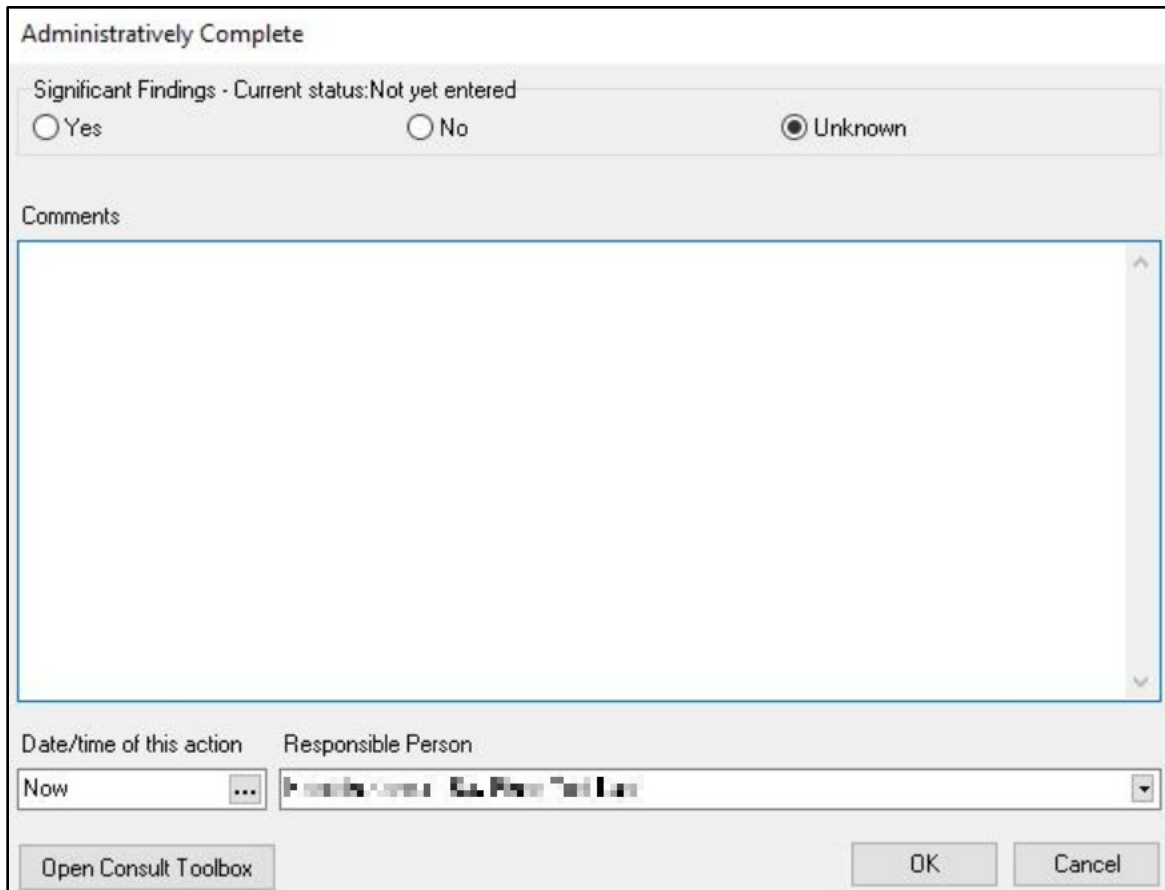
- **Administratively complete with records follow-up** – Facility community care staff have received confirmation that the Veteran has attended the initial visit. One attempt has been made to obtain medical records without timely response from the community provider. This consult is being administratively completed. Two additional documented attempts must be made to obtain the medical records per the guidance in the Office of Community Care Field Guidebook.
- **Administratively complete without records follow-up (low-risk consult)** – Low Risk Consult – Facility community care staff receive confirmation that the Veteran has attended the initial visit. One attempt has been made to obtain medical records without timely response from the community provider. This consult is being administratively completed per the guidance in the Office of Community Care Field Guidebook.
- **Additional Comments**

### 4.10.1. Administrative Complete Consult Workflow

To administratively close a consult, follow the steps listed below:

1. From the **Action** menu, select **Consult Tracking...**, and then select **Administrative Complete**. The **Administratively Complete** dialog box displays.

**Figure 55: Administratively Complete Dialog Box**



The dialog box is titled "Administratively Complete". It contains a section for "Significant Findings - Current status: Not yet entered" with three radio buttons: "Yes", "No", and "Unknown". The "Unknown" radio button is selected. Below this is a large text area labeled "Comments". At the bottom, there are two fields: "Date/time of this action" with a dropdown menu showing "Now" and a calendar icon, and "Responsible Person" with a dropdown menu showing a name. There are three buttons at the bottom: "Open Consult Toolbox", "OK", and "Cancel".

2. From the **Administrative Complete** dialog box, click **Open Consult Toolbox**. The CTB Dashboard Screen displays.
3. From the **CTB Dashboard Screen**, under the workflow menu click **Administratively Complete**. The **Administratively Complete Dashboard Screen** displays.

**Figure 56: Administratively Complete Dashboard Screen**

The screenshot shows the 'Consult Toolbox' interface. At the top, there's a header with the VA logo and 'Consult Toolbox' text. Below this, a patient information bar displays details like 'Veteran Name: PATIENT, TEST', 'Residential Address: 611 1ST ST W, Morton, MN 56270', 'Consult to Service/Specialty: Audiology', 'Urgency: Routine', 'CID: 07/20/2021', 'Seen As: Outpatient', and 'Community Care Eligibility: Not Established'. On the left, a sidebar menu includes 'ADMIN COMPLETE' and 'Administratively Complete'. The main content area is titled 'Administrative Complete' and contains two radio button options: 'Administratively complete with records follow-up' (selected) and 'Administratively complete without records follow-up (low-risk consult)'. Each option has a descriptive paragraph. To the right of these options is a large text area for 'Additional Comments'. At the bottom right, there is a blue 'SAVE CHANGES' button.

4. Select the **Administratively complete with records follow-up** radio button to administratively complete the consult with records follow-up or select the **Administratively complete without records follow-up** radio button to administratively complete the low-risk consult without records follow-up.
5. Enter comments in the **Additional Comments** text field.
6. Click **SAVE CHANGES**. The **Preview of CTB Generated Consult Comments modal dialog** displays.
7. Click the **Close** button at the bottom of the dashboard screen to transfer the comments and return to CPRS. If you click the **X** at the top of the window, you can continue editing the consult in CTB.

## 4.11. View Consult History

Once you have saved your changes in CTB v2.0, you can view the consult history. To view consult history in CTB v2.0, follow the steps listed below.

1. Click **Add Data to Consult History**.
2. From the **Action** menu, select **Consult Tracking...**, and then select the workflow option. The workflow dialog box displays.
3. From the workflow dialog box, click **Open Consult Toolbox**. The CTB Dashboard Screen displays.
4. From the **CTB Dashboard Screen**, under the workflow menu click **View Consult History**. The **Consult History** modal dialog displays.

Figure 57: Consult History Modal Dialog

View Consult History

Current Pat. Status: Outpatient  
UCID: 983\_158104  
Primary Eligibility: SERVICE CONNECTED 50% to 100%(VERIFIED)  
Patient Type: SC VETERAN  
OEF/OIF: NO

Service Connection/Rated Disabilities  
SC Percent: 50%  
Rated Disabilities: BONES AND JOINTS, TUBERCULOSIS OF (50%)

Order Information  
To Service: COMMUNITY CARE-CARDIOLOGY  
From Service: ADMIN PAT ACTIVITIES  
Requesting Provider: Dr. [REDACTED]  
Service is to be rendered on an OUTPATIENT basis  
Place: Consultant's choice  
Urgency: Routine  
Clinically Ind. Date: Jun 21, 2021  
DST ID: dc7a38aa-8823-4a25-ae0b-605087331b2f  
Orderable Item: COMMUNITY CARE-CARDIOLOGY  
Consult: Consult Request  
Provisional Diagnosis: Exposure to X-Rays, Sequela(ICD-10-CM W88.0XXS)  
Reason For Request:  
Test

Inter-facility Information

## Appendix A: Acronyms and Abbreviations

Acronym	Definition
BMI	Best Medical Interest
CAN	Care Assessment Need
CDW	Corporate Data Warehouse
CID	Clinically Indicated Date
CPRS	Computerized Patient Record System
CTB	Consult Toolbox
DOA	Delegation of Authority
DoD	Department of Defense
DST	Decision Support Tool
HEC	Health Eligibility Center
NSD	National Service Desk
OIT	Office of Information and Technology
Opt	Option
RFS	Request for Service
SEOC	Standardized Episode of Care
VA	Department of Veterans Affairs
VAMC	VA Medical Center
VDL	VA Software Document Library
VHA	Veterans Health Administration
VistA	Veterans Health Information Systems and Technology Architecture
VVC	VA Video Connect

## Appendix B: Consult Factor Types and Definitions

Consult Factor Type	Consult Factor Text
A1-	Accept consult, schedule within 1 week, (OK to overbook).
A1M	Accept consult, schedule within 1 month (OK to overbook).
A2-	Accept consult, schedule within 2 weeks, (OK to overbook).
AB-	AB-Address bad or no address on file, unable to contact by letter.
AC-	Accept consult, schedule routine appointment.
ACC	CLA-Admin Care Coordination Level:
ACC	Admin Screening Care Coordination:
ACN	Administratively closed without records
ADT	Accept Consult, schedule on specific date, ok to overbook
AFD	AFD-DST Forward to:
AOK	Mailing Address Confirmed
AS-	Accept consult, see scheduling order for scheduling instructions.
BST	BST-Verified best Contact Number:
BVP	BVP-Basis for Veteran Preference:
C1-	C1-First call to Veteran:
C1C	C1C-First call to Veteran:
C2-	C2-Second call to Veteran:
C2C	C2C-Second call to Veteran:
C3-	C3-Third call or more to Veteran:
C3-	Third or additional call to veteran, unable to schedule.
C3-	Third or subsequent call to Veteran(unsuccesful scheduling)
C3C	C3C-Third call or more to Veteran: {detail}
C3C	Comm Care Third or subseq. Call to Veteran
C6E	C6E-Veteran is eligible for C6 program. (future)
C6M	C6M-Site has MOU with C6 (future)
C6P	C6P-C6 is managing care (future)
CA1	CA1-Consult has been reviewed for clinical appropriateness:
CAP	CC approved:
CAP	Community care approved for specified program.
CAP	Community care approved for specified program.
CAS	CAS-Consult accepted for scheduling from UTS List

Authorized Use Only



<b>Consult Factor Type</b>	<b>Consult Factor Text</b>
CAT	CAT-SEOC CoC:
CB-	Patient contacted but pt will call back to schedule later.
CCE	CC Eligibility Status:
CCH	CCH-CC scheduling to be performed by:
CCH	Community Care Appt Scheduling to be handled by:
CCM	Care Coordination was manually Set
CED	Community Care Eligibility Details
CER	CER-Clinical evaluation of RFS:
CLA	CLA-Admin Care Coordination Level:
CLC	CLC-Clinical Care Coordination Level:
CLV	Clinical Triage Care Coordination:
CLV	Clinical Care Coordination Level:
COM	COM-Additional Comments:
COT	Community care appointment occurred, per patient (awaiting confirmation).
COT	COT-CC appointment has occurred, waiting for records:
CRC	CRC-Canceled CC consult:
CRV	CRV-Canceled VA Consult:
CSC	CSC-Consult stop code:
CSN	CSN-Clinical Service:
CST	CST-Consult service type:
CTA	CTA-Consult type assigned:
CTC	Clinical Triage: Complete
CTC	Clinical Triage completed
CTN	Clinical Triage: Not Required
CTR	Clinical Triage: Required
CV1	CV1-COVID-19 Priority 1
CV2	CV2-COVID-19 Priority 2
CV3	CV3-COVID-19 Priority 3
CV4	CV4-COVID-19 Priority 4
DAF	DAF-DST Forwarding: Yes/No
DCS	DSC-Discuss with clinical staff if no appt within wait time standard
DCS	DSC-Discuss with clinical staff if no appt within wait time standard

Authorized Use Only

<b>Consult Factor Type</b>	<b>Consult Factor Text</b>
DDF	DDF-DoD facility contacted to request care:
DDS	DDS-RFS Sent for DOA Review:
DDU	DDU-DoD Urgency:
DLA	DLA-DOAMS List reviewed: Does not require clinical review
DLC	DLC-DOAMS List reviewed: Clinical review required
DOK	DOK-OK to leave appt. details with:
DP-	Scheduling plans discussed with ordering provider.
DRR	DRR-Date community care records received:
DRS	DRS-Date community care records sent for scanning:
DSP	DSP-DST data saved prior to signing consult
DT1	DTE-Veteran's Day/Date Preference:
DU-	Document Uploaded to HSRM
DVE	DVE-DST Vista Error:
EEF	EEF-Extra scheduling effort:
EST	EST-Established patient, schedule appointment then cancel consult
FUV	Follow up call made to provider/vendor to check on status.
GVM	GVM-Clinical Review Method:
HAR	HAR-Hardship request approved by COS or designee:
HDL	HDL-Hardship decision letter sent to Veteran:
HDR	HDR-Hardship request disapproved by COS or designee
HR-	High risk consult, continue trying to schedule after mandated effort
IAV	IAV-Veteran informed of appt via:
ICR	ICR-Initiate Community Care Referral
INF	Veteran informed of eligibility, referral and approval.
L1-	Letter sent to patient.
L1-	L1-Unable to schedule letter sent by mail to Veteran.
L1C	Community Care unable to contact letter sent by Mail.
LC-	Certified letter sent to patient regarding scheduling.
LC-	LC-Above letter sent by Certified Mail.
LCC	Community Care unable to contact letter sent by Certified Mail.
LR-	LR-Low risk clinic/consult, may cancel after 1 missed appointment
ME-	May cancel if Veteran fails to respond to mandated scheduling effort

Authorized Use Only

<b>Consult Factor Type</b>	<b>Consult Factor Text</b>
MLS	MLS-Willing to travel up to (miles):
MOK	MOK-OK to leave appt. details on voice mail.
NAA	NAA-Next available appointment:
NR-	No records received after three attempts.
NRD	NRD-Requesting provider notified of RFS decision:
OCC	Ok to send to Community Care if no apt within wait time standard
OCC	Ok to send to Community Care if no apt within 30 days
OTP	OTP-Veteran OK to see other than Preferred Provider:
PB-	Phone contact number bad/incorrect or disconnected.
PFP	PFP-Veteran's Preferred Provider
PMO	PMO-Preferred modality for this consult:
PMO	PMO-Preferred modality for this consult:
PMO	PMO-Preferred modality for this consult:
PMO	PMO-Preferred modality for this consult:
PMV	PMV-Preferred modality for this consult:
PMV	PMV-Preferred modality for this consult:
PMV	PMV-Preferred modality for this consult:
PMV	PMV-Preferred modality for this consult:
PPP	PPP-Veteran expressed preference for specific community provider(s):
PRC	Procedure(s) Approved for Community Care
PRF	PRF-Preferred notification method:
PRQ	Provider requires records to review prior to scheduling.
PSP	Patient's actual Scheduled Provider
R1-	First attempt to get records from community care.
R1-	First attempt to get records from community care.
R2-	Second attempt to get records from community care.
R3-	3rd attempt to get records from community care.
R3-	Third attempt to get records from community care.
R3-	3rd attempt to get records from community care
RAC	RAC-Refer to Clinical Care Coordinator
RDR	RDR-RFS Date Received:
RDS	RDS-RFS sent for scanning:

Authorized Use Only

<b>Consult Factor Type</b>	<b>Consult Factor Text</b>
RFP	RFP-CC referral not processed:
RPR	RPR-Consult is related to previous referral, UCID: {ucid}
RR-	Records from community care provider received.
RRD	RRD-RFS details of what was requested:
RRH	RRH-Records Received via:
RSA	RSA-RFS Approved:
RSC	RSC-RFS is already covered under existing referral
RSD	RSD-RFS Disapproved:
RSP	RSP-Records faxed/sent to Community Care Provider.
SAR	Secondary Authorization Request
SCR	Service/Care Approved for Community Care
SEO	Standard Episode of Care
SEV	DCA-DST CC Best Interest of Vet:
SEV	DST CC Best Interest of Vet:
SEV	DST CC eligibility: No clinic appts available
SEV	DST CC eligibility: DRIVE TIME
SEV	DSF-DST CC Best Interest of Vet:
SEV	DCG-DST CC eligibility: GRANDFATHERED
SEV	DST CC eligibility: HARDSHIP
SEV	DST CC Best Interest of Vet:
SEV	DCO-DST CC Best Interest of Vet:
SEV	DST CC Best Interest of Vet:
SEV	DST CC Best Interest of Vet:
SEV	DST CC Best Interest of Vet:
SEV	DST CC eligibility: NO FULL-SVC VHA FACILITY
SEV	Presumed eligible, HEC Update Pending.
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SEV	SEV-CC Eligibility: {eligibilityCriteria}

Authorized Use Only

Consult Factor Type	Consult Factor Text
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SEV	SEV-CC Eligibility: {eligibilityCriteria}
SFD	SFD-Significant Finding
SPC	Specialty Approved for Community Care
SSP	Subspecialty Approved for Community Care
SUR	SUR-SAR/RFS Urgency:
SVC	Services requested.
TFR	Timeframe for Episode of Care Approved
TI1	TIM-Veteran's Time Preference:
US1	US1-Unable to Schedule: Prefers VA/No capacity
US2	US2-Unable to Schedule: No comparable service in the community
US3	US3-Unable to Schedule: Receiving care/Awaiting specialized service
VAT	VAT-Veteran willing to accept telehealth/virtual care appt.
VCC	COI-Veteran OPT-IN
VCC	VOI-Veteran OPT-IN
VCC	COO-Veteran OPT-OUT
VCC	VOO-Veteran OPT-OUT
VCC	Veteran CC Option:
VDS	VDS-CC referral disposition:
VSP	VSP-Veteran scheduling preference: